

CALIFORNIA STATE RETIREES



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A PUBLICATION REPRESENTING CALIFORNIA STATE RETIREES

MAY 2020

A Message from CSR President Tim Behrens

Dear Fellow CSR Members;
In April I had an opportunity to write to you to lay out the extraordinary steps the CSR Board of Directors took to protect the health and safety of CSR members during this rapidly evolving pandemic. As you may recall, my reaching out to you was also to inform you that the April edition of the CSR Retiree was unable to be published due to the pandemic as well as alerting you that the CSR Board's suspension of all CSR activities.

We are fortunate that we were able to publish this edition of the CSR Retiree and have included information that is directly relevant to the pandemic and the status of issues at CalPERS.

This edition of the Retiree also includes articles correcting some of the misinformation being circulated about your earned pensions, a discussion of the status of state legislative and budget issues, a review of CalPERS

health care issues and a report on CalPERS latest meetings.

Extended Suspension of CSR Meetings and Activities: The CSR Board has readdressed the original suspension of CSR activities and related timelines. **After a detailed and robust discussion, the CSR Board has once again unanimously extended the suspension of all CSR in-person activities through June 2020.** This includes cancellation of the previously scheduled June Board of Directors meeting. While in-person Board and Chapter meetings are suspended, your Board, committees, staff and Chapter officers are still working hard on your behalf and conducting essential CSR business through telephone, email and telework. Please be aware that the CSR office remains closed but CSR staff is operating as close to normal as possible to provide services to

CSR members and also adhere to all necessary safety protocols.

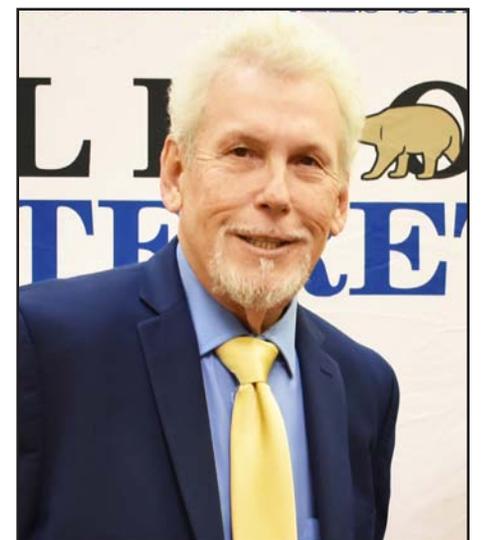
Pension Protection: We continue to work with CalPERS to determine any effects of this disruption to the Fund as a whole or on your earned health benefits. Be assured the CalPERS portfolio is positioned to withstand this pandemic and you will continue to receive your retirement check regardless of any further volatility in the stock market. As a reminder, the State Controller's Office notified CalPERS that direct deposit statements will not be printed and mailed to retirees until further notice. You may view your direct deposit statement online through your myCalPERS account.

Stay Connected with CSR: CSR remains focused on ramping up communication and emailing efforts to members. We want to again encourage all to sign up for our email distribution list. This can be done by visiting the CSR website at www.CalRetirees.org, hover over the Stay Connected tab and click on Subscribe to the CSR E-newsletter. Enter your complete information and you will automatically be added to our list to receive CSR emails. In the coming days, please check your spam folder to ensure our emails are not sent to the wrong folder.

CSR is dedicated to getting you relevant information on this crisis as quickly as possible as well as continuing working with all levels of the State, including CalPERS, to advocate for the provision of services to our members and, most importantly, the absolute protection of our hard-earned pension and health benefits.

On behalf of the CSR Board of Directors and your Chapter President and officers, I want to wish you and your loved ones well during these difficult times. As always, please do not hesitate to reach out to us at CSRInfo@CalRetirees.org or **888.808.7197** should you have any questions.

Thank you,
Tim Behrens
CSR President



••DATED MATERIAL - PLEASE DO NOT DELAY••



CALIFORNIA STATE RETIREES
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Uncertain Times and Doubt But California, CalPERS Will Bounce Back

These are most definitely uncertain and scary times. California, indeed the world, is in the midst of a coronavirus pandemic that continues to threaten lives and public health – and has driven millions to shelter inside their homes for weeks now. Large parts of our economy are shutdown, millions are newly unemployed, and stock market losses lead to predictable alarmist attacks on CalPERS. Like I said, these are tough times. But let's not lose our perspective. It may take some time, but public pension systems, state and local budgets, and the California dream will all bounce back before we know it.

CalPERS – Ignore the Pension Haters

Nobody should be surprised that the pension-haters – Sen. John Morlach and David Crane among them – are using the COVID-19 induced stock market drop to renew their attacks on the so-called “unsustainability” of CalPERS and defined benefit pensions. This is just what they do. But don't buy into the hater hype. In a recent Sacramento Bee opinion piece, I noted that history tells us that the markets will recover and that cycles of ups and downs are inevitable. We know that pensions are the very best way to protect the retirement security of public employees and all Americans. They are simply collective retirement savings systems into which workers of all ages and their

employers contribute, and which have professionally managed, diversified investments. As long-term investors, with decade-long investment horizons, pension systems are built to withstand the extremes of economic cycles. The expectation that investments will experience times of negative returns is inherently built into fund planning. We also know that market downturns severely harm those that rely upon individual accounts – or 401(k)s. If you happen to retire in a down cycle with a 401(k), it makes it far more likely that you will expend the money that is left before your savings can fully recover.

Also ignored by the pension haters are the economic benefits of California's pension funds and the importance those benefits will play as our state recovers from a coronavirus recession. A recent study showed that, during the fiscal year that ended in 2018, CalPERS retirees collectively generated \$23.5 billion in economic activity in California, supporting 137,000 jobs. An earlier study by CalSTRS found that its benefits generate \$11 billion in annual economic activity, supporting 92,000 jobs. Don't forget to remind your friends and family that your pension, and those of your CSR colleagues, will continue to provide a boost to California's economy, especially in smaller communities where the relative impacts are most

substantial.

State Budget – Legislature Going Forward

Two certainties will guide legislative deliberations in the weeks and months ahead. Per the California Constitution, the Legislature must pass a budget by June 15 and adjourn on August 31. Primarily to meet its own constitutional obligation to approve state spending, the Legislature has announced that it will return to the Capitol on May 4. The Assembly has already scheduled weeks of budget and bill hearings starting that first week. At the moment, the Senate is proceeding more cautiously amid speculation by some that it is too soon to return. On the budget, it is expected that the Governor will release a May Budget revision as usual in mid-May that will outline a FY 2020-21 “workload” budget – which will roll over the current year spending authority with minor adjustments for changes in caseload. A workload budget most definitely will include the money necessary to meet retiree health care and pension contribution statutory requirements. Additional funding to prevent the spread of the virus, and rebuild the lives of Californians devastated by it, will also certainly be part of it. But long gone is the somewhat ambitious budget proposal the Governor unveiled in January. It projected a \$5.6 billion surplus, over \$20 million in rainy day funds, and proposed expansions in health care, early childhood education, and a supplementary payment of \$500 million to bolster CalPERS.

Today, according to the Governor, that budget is “inoperable.” Assembly Budget Chair Phil Ting concluded that “we will have less money and less time to adopt a



Ted Toppin

balanced budget... We must lower expectations about our budget outlook to reflect our new reality.” With this year's tax filing delayed until July 15, the Governor and Legislature are likely to also undertake a so-called August budget revision to make changes to reflect the realities of the revenue that shows up in state coffers in July. According to Ting, “it is possible that the State will need to consider sizable ongoing reductions to major programs during this time.” What happens to the hundreds of bills that have been introduced this legislative session? Most will be shelved -- legislative leaders and committee chairs have asked legislators to drop all bills that do not “address a time-sensitive issue related to COVID-19” or have “urgent public safety implications.” The COVID-19 outbreak has greatly changed life as we know it, and thrown into disarray what are normally regimented state budget and legislative schedules. But California leaders will soon outline plans to reopen business and communities, our economy will recover, and some semblance of normalcy will return to our lives. No doubt, that is something to look forward to.



HAVE YOU MOVED?
Don't miss an issue of
the
California State Retiree!

To update your information, please
email csrinfo@calretirees.org

Seniors With COVID-19 Show Unusual Symptoms, Doctors Say

Older adults with COVID-19, the illness caused by the coronavirus, have several “atypical” symptoms, complicating efforts to ensure they get timely and appropriate treatment, according to physicians. COVID-19 is typically signaled by three symptoms: a fever, an insistent cough and shortness of breath. But older adults — the age group most at risk of severe complications or death from this condition — may have none of these characteristics.

Instead, seniors may seem “off” — not acting like themselves — early on after being infected by the coronavirus. They may sleep more than usual or stop eating. They may seem unusually apathetic or confused, losing orientation to their surroundings. They may become dizzy and fall. Sometimes, seniors stop speaking or simply collapse.

“With a lot of conditions, older adults don’t present in a typical way, and we’re seeing that with COVID-19 as well,” said Dr. Camille Vaughan, section chief of geriatrics and gerontology at Emory University.

The reason has to do with how older bodies respond to illness and infection. At advanced ages, “someone’s immune response may be blunted and their ability to regulate temperature may be altered,” said Dr. Joseph Ouslander, a professor of geriatric medicine at Florida Atlantic University’s Schmidt College of Medicine.

“Underlying chronic illnesses can mask or interfere with signs of infection,” he said. “Some older people, whether from age-related changes or previous neurologic issues such as a stroke, may have altered cough reflexes. Others with cognitive impairment may not be able to communicate their symptoms.”

Recognizing danger signs is important: If early signs of COVID-19 are missed, seniors

may deteriorate before getting needed care. And people may go in and out of their homes without adequate protective measures, risking the spread of infection.

Dr. Quratulain Syed, an Atlanta geriatrician, describes a man in his 80s whom she treated in mid-March. Over a period of days, this patient, who had heart disease, diabetes and moderate cognitive impairment, stopped walking and became incontinent and profoundly lethargic. But he didn’t have a fever or a cough. His only respiratory symptom: sneezing off and on. The man’s elderly spouse called 911 twice. Both times, paramedics checked his vital signs and declared he was OK. After another worried call from the overwhelmed spouse, Syed insisted the patient be taken to the hospital, where he tested positive for COVID-19. “I was quite concerned about the paramedics and health aides who’d been in the house and who hadn’t used PPE [personal protective equipment],” Syed said.

Dr. Sam Torbati, medical director of the Ruth and Harry Roman Emergency Department at Cedars-Sinai Medical Center, describes treating seniors who initially appear to be trauma patients but are found to have COVID-19. “They get weak and dehydrated,” he said, “and when they stand to walk, they collapse and injure themselves badly.”

Torbati has seen older adults who are profoundly disoriented and unable to speak and who appear at first to have suffered strokes. “When we test them, we discover that what’s producing these changes is a central nervous system effect of coronavirus,” he said.

Dr. Laura Perry, an assistant professor of medicine at the University of California-San Francisco, saw a patient like this several weeks ago. The woman, in her 80s, had what seemed to be a cold before becoming very confused. In the hospital, she

couldn’t identify where she was or stay awake during an examination. Perry diagnosed hypoactive delirium, an altered mental state in which people become inactive and drowsy. The patient tested positive for coronavirus and is still in the ICU.

Dr. Anthony Perry, an associate professor of geriatric medicine at Rush University Medical Center in Chicago, tells of an 81-year-old woman with nausea, vomiting and diarrhea who tested positive for COVID-19 in the emergency room. After receiving IV fluids, oxygen and medication for her intestinal upset, she returned home after two days and is doing well.

Another 80-year-old Rush patient with similar symptoms — nausea and vomiting, but no cough, fever or shortness of breath — is in intensive care after getting a positive COVID-19 test and due to be put on a ventilator. The difference? This patient is frail with “a lot of cardiovascular disease,” Perry said. Other than that, it’s not yet clear why some older patients do well while others do not.

So far, reports of cases like these have been anecdotal. But a few physicians are trying to gather more systematic information.

In Switzerland, Dr. Sylvain Nguyen, a geriatrician at the University of Lausanne Hospital Center, put together a list of typical and atypical symptoms in older COVID-19 patients for a paper to be published in the *Revue Médicale Suisse*. Included on the atypical list are changes in a patient’s usual status, delirium, falls, fatigue, lethargy, low blood pressure, painful swallowing, fainting, diarrhea, nausea, vomiting, abdominal pain and the loss of smell and taste. Data comes from hospitals and nursing homes in Switzerland, Italy and France, Nguyen said in an email.

On the front lines, physicians need to make sure they carefully

assess an older patient’s symptoms. “While we have to have a high suspicion of COVID-19 because it’s so dangerous in the older population, there are many other things to consider,” said Dr. Kathleen Unroe, a geriatrician at Indiana University’s School of Medicine.

Seniors may also do poorly because their routines have changed. In nursing homes and most assisted living centers, activities have stopped and “residents are going to get weaker and more deconditioned because they’re not walking to and from the dining hall,” she said.

At home, isolated seniors may not be getting as much help with medication management or other essential needs from family members who are keeping their distance, other experts suggested. Or they may have become apathetic or depressed. “I’d want to know ‘What’s the potential this person has had an exposure [to the coronavirus], especially in the last two weeks?’” said Vaughan of Emory. “Do they have home health personnel coming in? Have they gotten together with other family members? Are chronic conditions being controlled? Is there another diagnosis that seems more likely?” “Someone may be just having a bad day. But if they’re not themselves for a couple of days, absolutely reach out to a primary care doctor or a local health system hotline to see if they meet the threshold for [coronavirus] testing,” Vaughan advised. “Be persistent. If you get a ‘no’ the first time and things aren’t improving, call back and ask again.”

Article courtesy of Judith Graham for Kaiser Health News



PUZZLES Where In the World?

ANSWERS ON PAGE 9



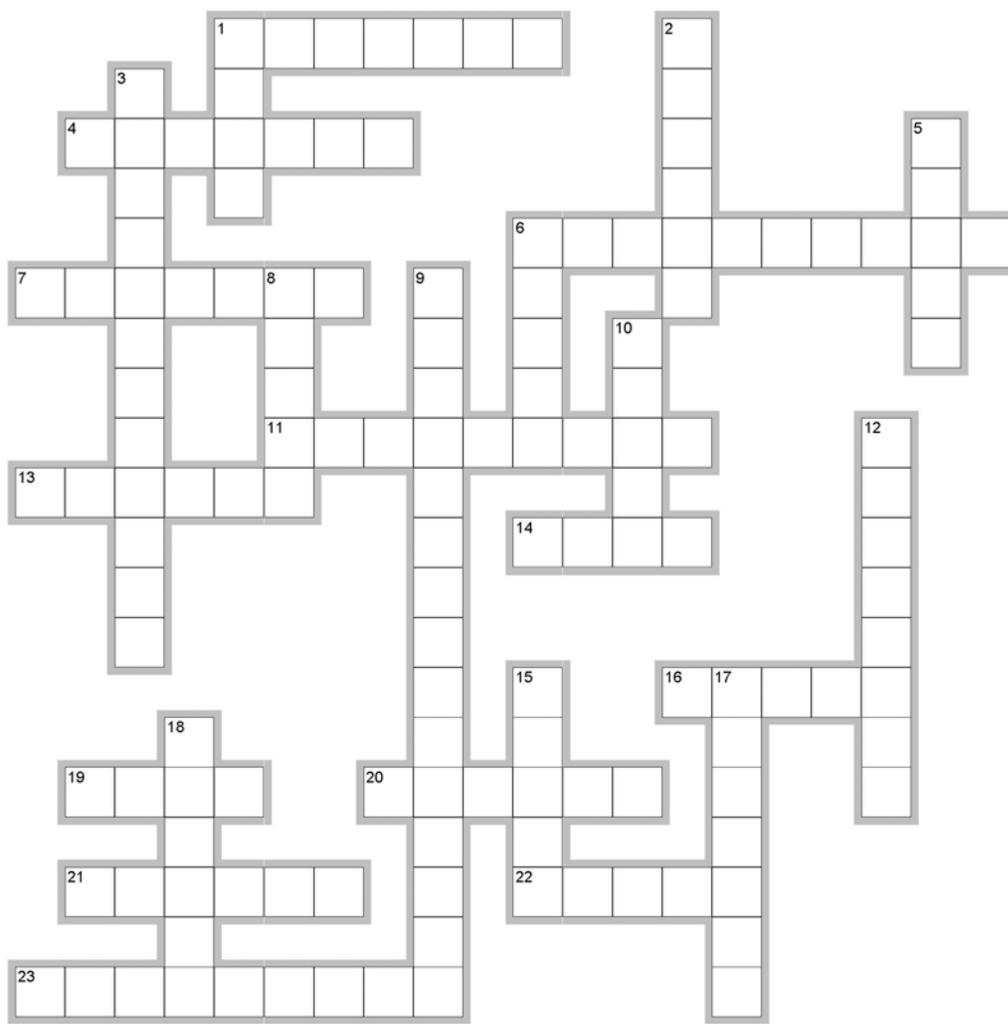
Margherita Flatbread Pizza

Ingredients

- 1 naan bread
- 3 pieces' fresh mozzarella cheese (sliced to 1/3- 1/2-inch thickness)
- 1 tomato (sliced as thin as possible)
- 6 leaves basil
- 3 cloves garlic (pressed; or 1 tsp dry garlic powder)
- 1 1/2 tablespoons olive oil
- 1 1/2 tablespoons balsamic vinegar
- Salt
- Pepper

Directions

1. Press fresh garlic and mix with oil.
2. Brush the flatbread with oil & garlic with half the mixture. Place in preheated to 350F oven for 5-8 minutes or until very crispy.
3. Remove from oven and place 3 slices of cheese on top of the flatbread, sprinkle with salt & pepper, then place thinly sliced tomatoes on top and repeat with a sprinkling of salt & pepper. Place back in the oven for another 5 minutes, plus extra 2-3 minutes on broil. Watch the bread closely, if it's too dark before 2-3 minutes, remove it from the oven immediately.
4. Meanwhile mix the remaining oil & garlic with the balsamic vinegar, stirring until smooth emulsion forms.
5. Chop the basil leaves.
6. Once flatbread pizza is baked and the edges are golden in color, remove from the oven, drizzle with however much of the balsamic vinegar mixture you would like, sprinkle with basil leaves, slice, serve and enjoy!



EclipseCrossword.com

ACROSS

1. City of Casablanca
4. Prime Meridian
6. Caspian Sea
7. Reykjavik - Capital city
11. Ayers Rock
13. RIO DE JANEIRO
14. Euphrates River
16. The Great Pyramids
19. Lima, Capital city
20. Yucatan Peninsula
21. Northwest Territories
22. Taj Mahal
23. Largest Island country

DOWN

1. Timbuktu
2. Petra, City cut from rock
3. Golden Gate Bridge
5. Leaning Tower of Pisa
6. Nairobi, Capital City
8. Mt. Everest (in Tibet and ___)
9. Giant's Causeway
10. Forbidden City
12. City of Karachi
15. Port-au-Prince, Capital City
17. Black Forest
18. Eiffel Tower

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To Your Health



By Larry Woodson, CSR Health Benefits Committee chair

In the 4 years I've been writing this column, never has the title been more meaningful. I hope all our members and their families are safe and well in these challenging times. I won't say much more about COVID-19 since we are all overwhelmed with information and guidance. I will discuss the possible impacts it may have on our 2021 rates and reinforce what CalPERS has already said: all our health plans will cover testing costs. Treatment will also be covered with no deductibles or copay at least through May. For additional information on what CalPERS is doing to address and deal with COVID-19, this link provides some Q and A's with their Chief Health Director, Don Moulds: www.news.calpers.ca.gov/covid-19-qa-with-calpers-chief-health-director/

I and other HBC members are staying engaged with CalPERS, but solely electronically rather than in person. I and other HBC members joined the Stakeholders Briefing on April 16, which was held by conference call. There were 2 agenda items which addressed health benefits: The PPO Health Plan Assessment and 2021 Health Plan Rate Development Update. The PPO Assessment Report

was given by Marta Green of CalPERS health team. It was also presented to Board members at the Pension and Health Benefits Committee (PHBC) meeting April 21. This assessment focuses on the 3 Anthem Blue Cross basic plans: PERSCare, PERS Choice, and PERS Select. These are the plans called self-funded because CalPERS actually pays all medical costs and just pays Anthem to administer the plans. There has been great volatility in rates since CalPERS abandoned the practice of Risk Adjustment 3 years ago. That caused PERSCare rates to soar and created migration by many PERSCare members to other plans since they couldn't afford the premiums. Unfortunately, in at least 18 rural counties where no HMO plans are available, they could not choose anything but PERS Choice or PERS Select. The Assessment goal is to understand the causes of premium disparities among the 3 plans and help inform proposed changes to achieve stability of the PPO program. They hope to reduce premium volatility and minimize member disruption/migration. The report is very well done, in my opinion, and can be viewed in its entirety by finding the PHBC Agenda for April 21 and clicking on the Attachment 1 link under Item 7a.

I made some comments at Stakeholders regarding the report. In its discussion of Risk Adjustment, it omits stating one of its primary objectives, to prevent "cherry picking" by insurers to keep their costs lower by not covering high risk populations (older persons or those with chronic conditions). And it worked well toward that end while they used it. PERSCare has better benefits (funds 90 percent of cost

as opposed to 80 percent for the other 2) and therefore attracted higher risk members. I speculated that CalPERS will end up closing down PERSCare after this study, which may save them money in the short term, but will simply cause costs (and premiums) to rise in the long term for PERS Choice and PERS Select since members with greater needs (and higher costs) will migrate there; at least those in rural counties with no other choices. I also pointed out that PERSCare has one of the highest member satisfaction ratings while PERS Select has one of the lowest. Marta Green also gave an update on the 2021 Rate Development process. Since CalPERS is currently involved in negotiation with all providers and it is a confidential process, the information we are provided is limited. She did report that COVID-19 is having an impact on rate setting. It has created many uncertainties in terms of potential cost impacts and also may affect the timing of the rate approval, although they are still aiming for the June meeting of PHBC for final rate approval. Covered California, which administers the individual plans under the Affordable Care Act, projected potential rate increases for 2021 of up to 20 to 40 percent. That was several weeks ago and is a worst-case scenario. In my own research, including an article appearing in Vox, I'm finding some factors which may mitigate cost increases. First, insurers can't cite losses in 2020 to increase costs in 2021, because rate setting is based on 2019 cost data. If the virus lingers or rises in 2020, and it appears it will carry over into 2021 with high cost, then it could affect rates. But if it begins downward trend and continues downward in 2021, rates should not be affected as much. Another critical factor is the savings plans are currently gaining due to postponement of elective surgeries and procedures. While this is costing hospitals huge income, it's saving the insurers millions. United Health Group just reported

a \$5 Billion quarterly profit for the current quarter, a 3 percent increase over last year's same quarter. Their CEO attributed this profit in large part to postponement of elective procedures. With those kind of profits, I would hope CalPERS hangs tough in their negotiations with UHC. Lastly, Ms. Green announced that CalPERS was, for the first time, relying on their own cost data for 2019, and not relying on data provided by the insurers. I see this as a significant improvement.

I also participated in the PHBC meeting April 21 and gave public comments (in email) along with President Behrens objecting to proposed language changes to the PHBC Delegation Resolution which would remove important Board authorities over staff. We cited 3 areas of concern. We also objected to the fact that these changes were listed as a consent item, which typically means no board member discussion, and is automatically approved. To their credit, the Committee actually withdrew the item from consent, directed staff to go back and review the language, and bring it back in June. CalPERS staff reached out to CSR this week and Tim Behrens, staff Corinne Celentano, and I had a Webex call with the key manager on this issue. We came up with some compromise language which Tim and I were satisfied with, and I assume will be in the next draft. In public comment, I also asked for clarification on whether stakeholders will get to see proposed rates prior to final approval. Usually the board doesn't respond to comments, but they did on this. Both Don Moulds, the Director of Health Benefits and Rob Feckner, Chair of PHBC made comments assuring me we would be given a look prior to the PHBC meeting of final approval currently targeted for June. It would not surprise me that it slips to July, which could allow some extra time for additional COVID-19 data to be analyzed. Stay safe and healthy.

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AND STAY UPDATED ON WHAT'S GOING ON AT CSR!
WWW.CASTATERETIREES.ORG/CSRNEWSLETTER

NEWS

COVID-19 Changes Rules for Working After Retirement

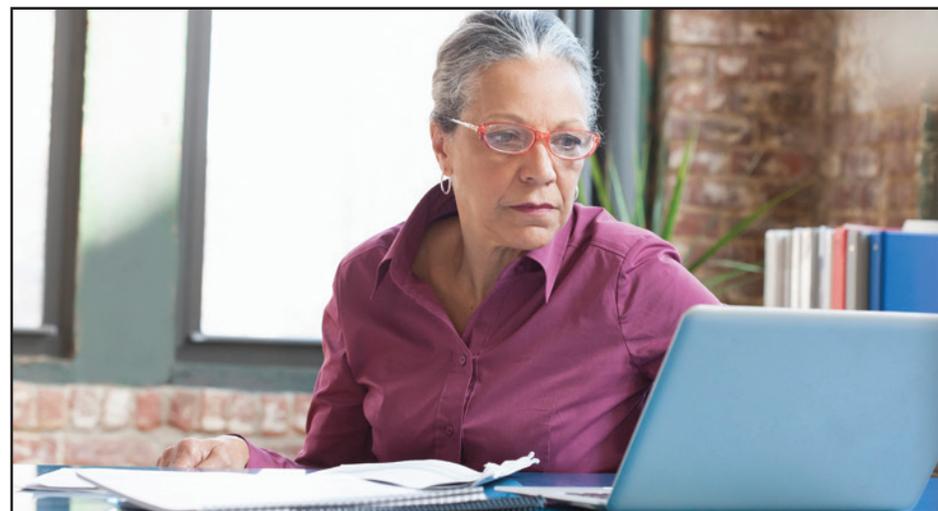
Due to the COVID-19 pandemic, Governor Gavin Newsom issued Executive Order N-25-20 (PDF) to further enhance California's ability to respond. The order lifts work restrictions for retired annuitants, but only applies if your work is directly related to assisting with the COVID-19 response.

If your work is in response to this emergency, the governor suspended these rules for retired annuitants:

- 960-work-hour limit (per fiscal year)
- 180-day break in service
- 60-day separation service requirement
- If you are **under** the normal retirement age, you can still return to work before the 60-day separation, but the law still prohibits you from entering into any predetermined employment agreement between you and the employer to return to work.
- If you have attained the normal retirement age, you can work with your employer to determine when you can return to service. Normal retirement age for CalPERS purposes is the age listed in your retirement benefit formula, for example, age 55 for the 2% at 55

formula, or age 62 for the 2% at 62 formula.

For example, if the person who



typically distributes checks in the accounting office is out of work due to illness or for childcare reasons, you may work in their place. This exemption would also apply if an employer needs extra janitorial staff to help clean the building, for example.

The suspension is active from the date the state of emergency was declared (March 4, 2020) until the state of emergency is lifted.

If your work is in compliance with this order, you will receive a letter confirming that you can exceed the 960-hour limit per fiscal year.

Rules to Remember

While some of the rules are suspended due to the emergency, restrictions still apply if you're

considering working as a retiree with a CalPERS-covered employer. Violating those restrictions may result in potential consequences.

These rules still apply:

- CalPERS retirees can only work for CalPERS-covered employers as retired annuitants in positions designated for retirees only and employed for extra help or special project work. You cannot be employed in a regular staff position, even if the position is part time.
- A recent retiree must separate from all CalPERS-covered employment, even if that

employment was not reported to CalPERS.

- Once employed, you can only be paid the hourly pay rate on the CalPERS-covered employer's publicly available pay schedule for employees doing comparable work. You cannot receive any other additional compensation or benefits (for example, vacation pay, longevity pay, shift differentials, or bonuses).

Violating any of these post-retirement employment requirements may result in mandatory reinstatement. If reinstated, your retirement will be terminated, and you'll be required to reimburse CalPERS the amount of retirement allowance received during the violation period.

Additional information and other conditions not covered in this article, such as working as a disability retiree or independent contractor, are detailed on our Working After Retirement page. You can also view our publication Employment After Retirement (PUB 33) (PDF) for more information, or call CalPERS at **888 CalPERS** or **888.225.7377** with any questions.

6 Ways to Stay Healthy While You Stay Home



EAT HEALTHY FOODS

Eat more fruits and veggies; reduce salt, saturated fat, and added sugar



QUIT SMOKING

You can quit today! Call 1-800-QUIT-NOW for free support



TOSS EXPIRED MEDICINES

Expired medicines can be less effective, and can even harm your health



DRINK MORE WATER

Substituting water for sugary drinks is better for your teeth and reduces calories



GET EXERCISE

Get at least 150 minutes of weekly physical activity (30 mins, 5 times a week)



GET PLENTY OF SLEEP

Sleep at least 7 hours every night to stay healthy

HHS.gov

SAVVY SENIOR

Grocery and Meal Service Delivery Options for Seniors Sheltering in Place

Dear Savvy Senior,
Can you recommend some good grocery and/or meal service delivery options for seniors? My 78-year-old mother has always shopped for herself, but since the coronavirus pandemic hit the grocery store shelves are always half empty, and she's getting more fearful of leaving the house.
Parent Helper

Dear Helper,
There are numerous grocery and meal service delivery options available to help seniors stay safe at home during this pandemic, but what's available to your mom will depend on her location and budget. You should also be aware that because of demand, many grocery and meal delivery services are overwhelmed right now, so some services in your mom's area may be greatly delayed or temporarily unavailable. That said, here are some good options to look into.

Grocery Delivery Services

Today, there are a variety of websites and apps that allow you or your mom to shop for groceries and other household goods without having to step foot inside a store. Most of these services offer memberships (fees usually run around \$100/year), which will get you or your mom free deliveries on orders over \$30 or \$35. Or, they'll charge a flat delivery fee, which typically cost around \$8 to \$10. Depending on where your mom lives there are numerous grocery delivery services like Instacart ([instacart.com](https://www.instacart.com)) and Shipt ([shipt.com](https://www.shipt.com)), which work with a wide variety of grocery retailers, including national and local chains and are widely available throughout the U.S. They use independent-contractor shopper/drivers to pick up orders in stores and deliver them to you. You should also check into Walmart's online grocery delivery or pick-up service ([grocery.walmart.com](https://www.walmart.com)), which is available in hundreds of locations across



the U.S.; Amazon Prime Now ([primenow.amazon.com](https://www.amazon.com/prime-now)), which is offered in many U.S. cities; Peapod ([peapod.com](https://www.peapod.com)) that's available in 24 metro markets; and FreshDirect ([freshdirect.com](https://www.freshdirect.com)) which serves the New York, Philadelphia and Washington D.C. areas and a few other select cities in the northeast.

Meal Delivery Services

If your mom still enjoys cooking, another convenient option to consider is meal kit delivery services like Home Chef ([homechef.com](https://www.homechef.com)), Sun Basket ([sunbasket.com](https://www.sunbasket.com)) or HelloFresh ([hellofresh.com](https://www.hellofresh.com)).

Meal kits are subscription-based services that will send your mom a box containing fresh, pre-portioned ingredient items for that kit's recipe. All she'll need to do is combine the ingredients (some chopping, and slicing may be required) and cook it. Most meal kit services run between \$8 and \$12 per meal.

Or, if your mom wants a break from cooking, a great alternative is to set her up with a ready-made meal delivery service like Mom's Meals ([momsmeals.com](https://www.momsmeals.com)) or Silver Cuisine ([silvercuisine.com](https://www.silvercuisine.com)). Both of these companies, which cater to older adults, offer a wide variety of healthy, fully prepared meal choices (just heat and eat), that accommodate a host of dietary needs for those managing diabetes

or needing heart-friendly and/or lower-sodium meal options.

Mom's Meals, which run \$7 per meal plus delivery, arrive fresh and will last up to 14 days in the refrigerator. Silver Cuisine meals are delivered frozen and cost \$12 or \$13 per meal.

You should also find out if there's a senior home delivery meal program in your mom's area. Meals on Wheels is the largest program that most people are familiar with, but many communities offer similar



Send your senior questions to:
Savvy Senior, P.O. Box 5443
Norman, OK 73070
or visit [SavvySenior.org](https://www.SavvySenior.org)

programs sponsored by other organizations that go by different names.

To find services available in your mom's area, visit [MealsOnWheelsAmerica.org](https://www.MealsOnWheelsAmerica.org), which offers a comprehensive directory on their website.

Most home delivered meal programs across the U.S. deliver hot meals daily or several times a week, usually around the lunch hour, to seniors over age 60. Weekend meals, usually frozen, may also be available, along with special diets (diabetic, low-sodium, kosher, etc.). Most of these programs typically charge a small fee (usually between \$2 and \$6) or request a donation, while some may be free to low-income seniors.



CHAPTER MEETING NOTICES

PLEASE NOTE: FOR THE SAFETY OF OUR MEMBERS AND THEIR FAMILIES-ALL CSR MEETINGS AND ACTIVITIES HAVE BEEN CANCELLED. IF YOU HAVE ANY QUESTIONS, PLEASE EMAIL CSRINFO@CALRETIRES.ORG

CHAPTER 1

ALAMEDA/CONTRA COSTA COUNTIES

President: Carol Bowen, (510) 527-5131, CBowen@CalRetirees.org; **Vice President:** Stella Torrez; **Treasurer:** Digna Laureano

CHAPTER 2

SACRAMENTO/YOLO AREA

President: Louis Espinoza, (916) 397-2526; LEspinoza@CalRetirees.org; **Vice President/Membership:** Phyllis Johnson, (209) 471-2192; johnsonphyllis010@yahoo.com; **Treasurer:** Kathleen Elwell, (916) 395-3717; **Secretary:** Dianne Welsh, (916) 682-7810

CHAPTER 3

WEST BAY AREA

President: Skip Charbonneau, (415) 648-4946; **Vice President:** Billie Feliciano, (415) 324-9058; **Secretary:** Lily Gee, (650) 992-2526; **Treasurer/Chapter Membership Chair:** Erlinda Villa (415) 407-7905, aida.b.villa@gmail.com

CHAPTER 4

GREATER LOS ANGELES

President: Marta Zaragoza, (310) 204-0484; **Vice President:** Cynthia Frison, (424) 227-6489; **Secretary:** Virginia Griffin, (323) 290-3655; **Treasurer:** Emma Johnson, (213) 258-8796

CHAPTER 5

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President: Anita McCabe, (209) 602-7775; **Vice President:** Alice Powell, (209) 559-1346; **Secretary:** Korryn Koplen, (209) 577-8376; **Treasurer:** Tom Hill, (209) 524-6650

CHAPTER 6

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CHAPTER 8

NORTH COAST AREA

President: Veronica Avila, (707) 487-0235, veronicacupcake57@gmail.com; **Vice President:** Karen Smith-Sayer (530) 277-7357, kpsayer@charter.net; **Secretary:** Sue D'Errico, (707) 954-2904, sue.derrico@yahoo.com; **Treasurer:** Patti Falk, (707) 445-1196, pmfalk@earthlink.net.

CHAPTER 9

LOS ANGELES AREA

President: Luanna Allard, (323) 304.9894, LAllard@CalRetirees.org; **Vice President:** Raelene Allard, (323) 221-6010, raeleneallard@ymail.com; **Secretary/Treasurer:** Donna Hernandez, (562) 405-1387, donnacooker@msn.com.

CHAPTER 10

SAN LUIS OBISPO

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CHAPTER 11

MID VALLEY

President: Christy Christensen-Fountain, (559) 707-7067; CChristensenFountain@CalRetirees.org; **Vice President/Secretary:** Claudine Edwards-McDougall, (559) 696-2628; **Treasurer:** Gigi Subilosky, (559) 269-5380;

CHAPTER 12

EASTERN MOUNTAIN AND HIGH DESERT AREAS

President: Linda Currie, (661) 273-6390, lcurrie197@roadrunner.com; **Vice President:** Stephanie Pryzbeski-Gilbert, (661) 537-3811, stefva22@hotmail.com; **Secretary:** Blanca Rodriguez, (909) 553-5625, blancrod703@yahoo.com; **Treasurer:** Barbara Griffin, (661) 266-1130, bgrif1275@gmail.com

CHAPTER 13

NO. CALIFORNIA/REDDING

President: Warren Schlatter, (530) 605-1588, WSchlatter@CalRetirees.org; **Vice President:** Robert Black, (530) 722-0511, bob_linda@charter.net; **Secretary:** Audrey Sandeen, (530) 221-3500, theswede8243@gmail.com; **Treasurer:** Georgene Gibson, (530) 529-0277, rbjeepman10@hotmail.com; **Chapter Membership Director:** Ed Huey, (530) 246-9456, csrchapter13@gmail.com.

CHAPTER 14

NORTHERN CALIFORNIA/CHICO

President: Vincent Herrera, (916) 804-6613, VHerrera@CalRetirees.org; **Vice President:** Joyce Finch, (530) 873-1165, joycef14@sbcglobal.net; **Secretary:** Todd Mayer, (530) 519-2897, toddmayer@comcast.net.

CHAPTER 15

SIERRA FOOTHILLS

President: Joann Stewart, (916) 412-2075; **Vice President:** Ruth Braun, (916) 434-6680, rbraun1110@gmail.com; **Treasurer:** Debora Remington, (916) 402-9118, DRemington@CalRetirees.org; **Secretary:** Frank Weinstein, (916) 223-5957, ch15secretary@hotmail.com.

CHAPTER 16

SAN JOAQUIN COUNTY

President: Evelyn (Evie) Poppa-McKenna, (209) 608-2149, suzypoppa@yahoo.com; **Vice President:** Marina Estrada, (928) 592-7087; **Secretary/Treasurer:** Sheila Ward-Shaw, (209) 915-1020, sheilaws2@yahoo.com.

CHAPTER 17

GREATER SAN DIEGO

President: Steve Haley, (619) 441-8769, SHaley@CalRetirees.org; **Vice President:** Elaine Edwards Yahraus, (619) 435-4044, eyahraus@gmail.com; **Secretary:** Gloria Koch, (619) 455-1917, kochgloria303@gmail.com; **Treasurer:** Diane Whorton, (619) 467-7861, dlw.union@gmail.com

CHAPTER 19

NORTH COAST AREA

President: Skip Hulet, (707) 279-4643; **Vice President:** Natalie Daugherty, (707) 485-8857; **Treasurer:** Dorothea M. Parsons, (707) 462-1209; **Secretary:** Marilyn Saegert, (707) 513-8943.

CHAPTER 20

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President: M. Cora Okumura, (818) 359-7625, mcokumura@yahoo.com; **Vice President:** Raymond Cole, (818) 898-9613, flipcole@yahoo.com; **Treasurer:** Gaylonn Mayo, (310) 897-7950, gaylonn28@gmail.com; **Secretary:** Norma Gallegos, (818)

CHAPTER 21

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CHAPTER 23

SAN JOSE AREA

President: Maria Aguilar, (408) 706-0366, MAguilar@CalRetirees.org; **Vice President:** Brad Geldert, (408) 655-4799, bgeldert@gmail.com; **Secretary:** Christine Jasper, (408) 373-1655, chris0521@sbcglobal.net; **Treasurer:** Larry Roberts, (510) 827-7938, lroberts1956@yahoo.com.

CHAPTER 26

BAKERSFIELD/KERN COUNTY

President: Ophelia Rabanal, (661) 458-6588, ORabanal@CalRetirees.org; **Vice President:** Henry Mendoza, (661) 725-8604; **Secretary:** Sue Kimbriel, (661) 333-0575, ckimbriel@bak.rr.com; **Treasurer:** Joe Salcido, (661) 477-2015, joe.salcido@yahoo.com.

CHAPTER 31

VENTURA/SANTA BARBARA

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CHAPTER 34

ORANGE COUNTY-SANTA ANA

President: Jenny Hayden, (714) 743-8423, JHayden@CalRetirees.org; **Vice President:** Joe Whaling, (714) 349-5393; **Secretary:** Adolfo Zavala, (714) 388-5355; **Treasurer:** Bill Serb III, (714) 826-6029; **Legislative Representative:** Karen S. Hight (949) 300.0627; **Membership Chair:** Jack Vander Bruggen, (949) 857-0955.

CHAPTER 35

SO. CENTRAL VALLEY PORTERVILLE AREA

President: Lou Flores, (559) 362-0689; **Vice President:** Mary McCaig, (559) 359-6069; **Secretary:** Joyce Jarrett, (559) 348-7845; **Treasurer:** Larry Long, (559) 781-8761.

CHAPTER 36

MONTEREY BAY AREA

President: Quen Quigley, (831) 261-7540, QQuigley@CalRetirees.org; **Vice President:** Carolyn McIntyre, (831) 722-3827; **Secretary:** Susan Sisson; **Treasurer:** Marilyn Hamilton

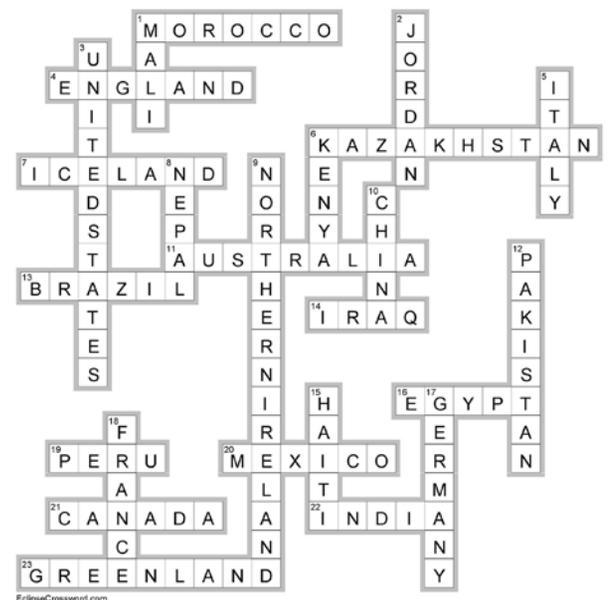
CHAPTER 165

SACRAMENTO

President: Joe Reynoso, (916) 708-0369, JReynoso@CalRetirees.org; **Vice President:** Gail Fasciola, (916) 386-1553, gailsfab@comcast.net; **Secretary:** John Bowden, (916) 361-8786, JBowden@CalRetirees.org; **Chapter Treasurer/Oregon Subchapter Chair:** Geanie Hixon, (541) 646-0925, geanie.hixon@gmail.com



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CALIF^{ORNI}A STATE RETIREES

CSR is the largest, most experienced organization exclusively representing state retirees!

OUR MISSION To protect the pension and health benefits of all retired state employees



Take the next step! Here are 10 great reasons to join!

- 1. Advocacy:** CSR has 87 years of experience representing retired state employees. Protecting your rights and benefits is our top priority. We strongly oppose legislation that threatens to undermine the CalPERS system.
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- 5. Community:** There are 26 chapters throughout the state. Attend your chapter's meetings for fun, social and educational events and speakers! Stay informed and be a part of an amazing community.
- 6. Retired Annuitant Program:** Looking to keep busy? Only CSR members are eligible for the CSR Retired Annuitant Program List. State offices throughout California contact our annuitant members for temporary, part-time jobs with the state.
- 7. 39,000 members strong and growing:** Our opinion matters to legislators, our governor, CalPERS and other agencies that can impact the pensions and benefits of state retirees. There is strength in numbers!
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- 10. All are welcome:** Any California state retiree can become a CSR member and get access to our exceptional member benefits and be included in our strong retiree community.

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thank you

MEDICAL WORKERS

CIVIL SERVICE EMPLOYEES

delivery folks

sanitary WORKERS

BANK WORKERS

FIRST RESPONDERS

JOURNALISTS (farmers)

PHARMACY WORKERS

factory workers

TRUCKERS

non-profit WORKERS

GROCERY WORKERS

MAIL CARRIERS

military personnel

EVERYONE WHO IS WORKING TO KEEP THINGS GOING IN THESE TRYING TIMES

UTILITY WORKERS

FROM ALL of US
**THANK
YOU!**

to our everyday

**ESSENTIAL
WORKERS**

our world

**NEEDS YOU &
WE APPRECIATE YOU**