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CSU-ERFSA Endorses Bei, Pacheco in September CalPERS Election

By Ted Anagnoson, Reporter Editor

On August 11th, the CSU-ERFSA executive committee endorsed Dominic Bei for Position A in the CalPERS member-at-large board of administration election to be held in September and Jose Luis Pacheco for Position B.

Bei is a 16 year veteran and current Fire Captain with the Santa Monica Fire Department. He is a former president of the Santa Monica Firefighters Local 1109 and heads the Firefighters Relief Fund that supports families affected by tragedy. He was appointed in 2018 to the Santa Monica Pension Advisory Committee, where he has helped shape local pension strategy. Retired Public Employees'

Association (RPEA) President Margaret Brown said, "Dominick Bei has the courage and integrity CalPERS needs right now. He understands what's at stake and will be a fierce advocate for protecting our pensions and healthcare. RPEA is proud to support him." RPEA, in making the case for his candidacy, said that his "real-world experience and effective stewardship align directly with these core member concerns: safeguarding retirement security, stabilizing health premiums, and strengthening investment strategy."

Jose Luis Pacheco is a four year veteran of the board and during his term urged

(Continued on page 4)

Health Benefits: Drug Mgr. to Change

By Thomas Krabacher, Health Benefits Director

Change in Pharmacy Benefits Management. CalPERS has entered into a five-year agreement with CVS Caremark to serve as its pharmacy benefits manager (PBM) for the almost 600,000 CalPERS members who are enrolled in the system's HMO and PPO plans. CVS Caremark will replace OptumRX, who have served as the retirement system's PBM for the previous nine years.

In theory PBM's act as intermediaries between employers, in CalPERS' case the state of California, and pharmaceutical companies, to negotiate drug costs and determine what drugs are covered by a particular health plan. The goal of the change to CVS Caremark is to provide predictability in drug price increases,

which as noted below, have been a key driver of rising health care costs in recent years. Indeed, CalPERS' premiums have risen 30 percent over the past five years). As a performance incentive, CVS Caremark has agreed to specified financial penalties if they fail to meet agreed upon performance targets.

For most members the impact of the switch will be minor since the CVS Caremark (working with SilverScript) formulary – list of drugs covered – will be for the most part identical to that under OptumRX. It is estimated that at least 95 percent of members will be able to have

(Continued on page 8)

Inside this issue:

CSU-ERFSA Endorses Bei, Pacheco in Sept. CalPERS Board Election	1
Health Benefits: Drug Manager to Change	1
From the President	2
Resoures for This Era	2
Executive Director's Report	3
Research Grant Program	3
Membership Committee Brainstorming Ideas	3
Letter to the Editor	3
In Memoriam	4
Are Workers Retiring Later?	4
Legislative Report	5
Academic Freedom and the American University	6
'Alternative Facts' Aren't A Reason to Skip Vaccines	7
Fall Book Review	8
CSU-ERFSA New Members	9
Activcities of Daily Living (ADLs) - An Explanation	10
The 4% Rule and Its Variations	10
Immigration Crackdowns Disrupt the Caregiving Industry	11
CSU-ERFSA Calendar of Events	12

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From the President

I hope you're enjoying the final weeks of what has been, for many, a refreshing and meaningful summer. We always enjoy hearing from members about their travels, experiences, and recommendations. Please consider sharing your stories with *The Reporter*.

I've recently been reminded of something we all know but sometimes forget: friendships are one of the most important contributors to long-term health and happiness. I like to think of all CSU-ERFSA members as friends – even those I haven't had the chance to meet in person. I'm always interested in your thoughts, stories, and interests.

In early August, the executive committee held its first meeting of the new academic year. We took time to get acquainted and reviewed our responsibilities. I will continue to serve as president. Joining me are:

- Stephanie Coopman (San Jose), Vice President and Website Administrator
- Ira Schoenwald (Channel Islands), Treasurer
- Bethany Shifflett (San Jose), Secretary
- Marshelle Thobaben (Humboldt), Chair, Grants Committee
- Robert Girling (Sonoma), Chair, Legislative Committee
- Tom Krabacher (Sacramento), Chair, Health Benefits Committee
- John Tarjan (Bakersfield), Chair, Membership Committee

We also began planning our upcoming State Council meeting, our first in-person gathering since fall 2019. There's much to look forward to. We discussed how to improve communication between CSU-ERFSA and our members, as well as with our campus affiliates. Strengthening these connections is key to increasing engagement, expanding membership, and enhancing the value we provide to our members.

An important topic that emerged as we began working together was communication, specifically, how each of us uses email and texting. Unfortunately, a few members received scam messages that created confusion due to unfamiliarity with one another's communication styles.

Considering that, I want to share a brief reminder of common signs of scam emails

or texts:

- Generic greetings or names that don't match how you're usually addressed
- A false sense of urgency
- Unexpected attachments (especially from unknown senders)
- Poor grammar or numerous typos
- Suspicious or unfamiliar links. Always double-check URLs
- Requests for sensitive personal information or money
- Multiple unknown recipients on a single message

Our roles and names are often publicly listed on websites, which makes us potential targets for scammers. If you ever receive a message claiming to be from CSU-ERFSA that seems suspicious, please do not respond until you've confirmed its legitimacy by writing the sender independently or checking with Melanie in our office by phone or email (phones and emails are on this page). We want all our members to stay safe and informed.

Wishing you all a healthy and vibrant start to the fall season. Let's continue to build connections and support one another. Enjoy the beautiful weather!

Warm regards,

Sue Holl
sueh@csus.edu

Resources for This Era

Colleagues, are you looking for resources when you would like to voice support/concerns about issues? Here are some useful links:

Finding CA representatives:
<https://tinyurl.com/2zpjyctz>

Finding Federal reps:
<https://tinyurl.com/5atcw3ch>

Finding protest events near you:
<https://tinyurl.com/35zj853s>

CalPERS' website for the September election: <https://tinyurl.com/yc6ezwrn>
This website contains links to the candidate statements and candidate websites.

Exec. Dir. Report: Fall State Council

By Merry Pawlowski, CSU-ERFSA Executive Director

After a hiatus of five years, I am happy to report that CSU-ERFSA will return to meeting in person with a virtual component for those delegates who cannot do so at the next State Council meeting on Saturday, October 25, 2025, 9 a.m. – 3 p.m.

With the help of my planning committee members, Kathy Reilly, Jay Swartz, Jerry Schutte, and Tim Fox, I'm working on a lively agenda that will afford attendees the opportunity to reconnect with colleagues and friends while discussing issues that are vital to CSU retired faculty and staff.

Our meeting venue is the Orchard

Conference Center at CSU Northridge, with ample space to accommodate our group and to provide Zoom access for those who cannot attend in person. Catering for the meeting will include pastry, coffee, and tea in the morning, with a sandwich board and beverages for lunch. As a reminder and incentive to attend in person, CSU-ERFSA reimburses travel expenses for one delegate from each affiliate, but additional delegates are welcome to attend at their own expense.

I look forward to welcoming you either in person or virtually and encourage you to become an active member in helping chart the course of our organization for the future.

Membership Committee Brainstorming Ideas

By John Tarjan, Chair

The Membership Committee (plus) held a brainstorming session via Zoom in May. After the State Council meeting coming up, we hope to reach out to campus affiliates to generate even more ideas for increasing membership and providing more services and opportunities to existing and prospective members.

- More outreach/coordination with campus affiliates.
- Share contact information of members who live closer to other campuses than the one from which they retired.
- Develop a promotional video that would explain the many benefits of CSU-ERFSA.
- Explore strategies for developing more complete contact lists of members.
- Perhaps work with local senates to more broadly distribute CSU-ERFSA and CalPERS information.

Service Opportunities:

- Identify those with mobility issues and perhaps organize regular visits by CSU-ERFSA members.
- Share ways in which members across the state continue to contribute to their campuses.

Activities for Current and Prospective Members:

- Zoom lectures/discussions led by expert members and invited presenters.
- Regular informal dinner meetings at local restaurants.
- Group attendance at local cultural/entertainment/other events.
- Special Zoom interactive sessions with Fidelity representatives.
- CSU-ERFSA affiliate-sponsored award for lifetime contributions to the campus.

In sum, there was general agreement to find ways to meet member needs beyond financial and benefit-related issues and to explore ways to generate more complete and accurate methods for contacting members

Letter to the Editor

To the editor:

Re long-term care, p. 11, June Reporter:

It might be a good idea to either direct retirees to resources and/or discuss our current health benefits for out-of-state and out of country members. The piece discusses future options, but neglects to tell readers what the current benefits are. I know how Medicare works, but does it work outside of the country?

Regarding LTC coverage. I too got the invitation to increase my LTC coverage. Yes, it is quite expensive, but my increase in cost was 49%, not 57%. Yes, it is a whopping increase. So I discussed it with my financial advisor and decided to keep it given two factors: the cost of care has increased substantially and this is about par with current levels, and my age (turned 80). His thought, given my financial position generally, is that I could keep the coverage for another three years and then decide to drop or maintain coverage. I think you should note in a future piece to consult with an expert in the long term care field that people should assess their situation on the three variables: age, their financial status, and potential cost of care.

Michael Semler, Professor Emeritus
Sacramento State University

Ed. Dr. Semler's points are well taken. We will take them up in future issues.

CSU-ERFSA Research Grants Program

Reminder: Grant applications are due in the CSU-ERFSA Office no later than Thursday, October 30, 2025 – 2:00 p.m. PDT. Awards will be announced by December 2025.

CSU-ERFSA encourages members involved in research and creative projects to apply for a grant. The small grant program is competitive, with past awards ranging from \$100-\$1,000, depending upon the number of proposals and the amount of money made available for grants by the CSU-ERFA Foundation. Preference is given to first time grant applicants when grant proposals are of equal merit.

Grants are generally limited to a member being eligible to two (2) grants every five (5) years.

Grant applications and guidelines can be downloaded from the CSU-ERFSA Grant Awards Program web page. Go to the main CSU-ERFSA page at <https://www.csuerfsa.org/> Everything is under the Grants menu. Or you can call the CSU-ERFSA office at (818) 677-6522, or email your request to csuerfsa@csun.edu.

If you are reading *The Reporter* online and would like to drop your paper subscription (i.e., read *The CSU-ERFSA Reporter* online only) please drop the office a note at csuerfsa@csun.edu.

CalPERS Board Election

(Continued from page 1)

improved investment oversight, more transparency in rate-setting, and has consistently voted to protect earned benefits. “Pacheco has earned the trust of our members by standing up for retiree and demanding oversight of private equity and investment decisions,” said Margaret Brown, herself a former member of the board of administration and now the president of RPEA.

The September election is for the two member-at-large seats on the CalPERS board of administration. The 13-member board sets policy and makes decisions that directly affect members and employers, including annual health premiums and allocations of the pension fund's investments. Under the California Constitution, the CalPERS board has exclusive authority to administer the CalPERS pension fund.

A member-at-large election means that all eligible active and retired CalPERS members (excluding survivors and beneficiaries) are eligible to vote for these two positions. There are approximately 1.5 million eligible voters. Participation rates are sometimes below 10% and rarely above 20%. **Please vote as soon as you receive your ballot; many members put the ballots aside and then do not vote within the one month period allowed.**

A complete listing of the nominees follows:

Member-at-Large Position A

• **Dominick Bei** – City of Santa Monica Fire Department, currently a Fire Captain. His website is www.beiforcalpers.com. Bei has been endorsed by the Retired Public Employees Association (RPEA), California State Retirees (CSR), and by CSU-ERFSA.

• **Steve Mermell** – City of Pasadena (retired). Mermell retired as city manager of Pasadena. Website: <https://tinyurl.com/vyj5thdb> Mermell has been endorsed by Third Act, an organization that has urged CalPERS to eliminate investments in fossil fuel companies. He was the only one of the six candidates who agreed to meet with Third Act members.

• **David Miller** (incumbent) – Department of Toxic Substances Control, currently Senior Environmental Scientist Specialist. He is endorsed by the SEIU. His website is www.davidmillerfor-calpers.org.

Member-at-Large Position B

• **Sam Hasan Akkad** – Department of Transportation (retired). His last position was Senior Bridge Engineer. We couldn't find a website for his candidacy.

• **Troy Johnson** – Sweetwater Union High School District, currently Senior Administrative Assistant. His website is www.troyjohnsonforcalpers.org. He is endorsed by the SEIU.

• **Jose Luis Pacheco** (incumbent) – San Jose Evergreen Community College District. He is currently SharePoint Developer/Administrator. His website is www.pachecoforcalpers.com. He is endorsed by RPEA, California State Retirees, and CSU-ERFSA.

Ballots are to be mailed August 29, and votes must be received by September 29 to be counted. RPEA strongly recommends voting on paper, so that if a recount is needed, you can be sure that your vote will be counted accurately. The terms of the incumbents, David Miller and Jose Luis Pacheco, will expire on January 15, 2026. The new terms of office will begin January 16, 2026, and end January 15, 2030.

More information on the board election is available on the CalPERS board elections page, <https://tinyurl.com/yc6ezwrn>

Are Workers Retiring Later?

The Center for Retirement Research at Boston College has a blog on senior issues, written now by Harry Margolis, and his June 4th offering centers on the question of whether workers are staying in the workforce longer due to more opportunities, obtaining more money for retirement, benefitting from social engagement in the workforce, and/or obtaining higher Social Security payments by delaying their claims until an older age.

In Memoriam

Bakersfield – Jack Goldsmith

Chico – Esther Franklin

Dominguez Hills – Eunice Krinsky

East Bay – Basil J. Sherlock

Fullerton – Louis Merrill Ring

Humboldt – Paul S. Kelly

Long Beach – Claire A. Betar
Paul Abels
Steven A. Fisher
Patricia D. Jersin
Barbara R. Mitchell
Fernando Peñalosa

Northridge – Betty J. Bauml
John S. Irving

Pomona – James W. Razukas

Sacramento – Robert T. Olmstead, Jr.
Brian P. Parker
Jean E. Torcum

Sonoma – Noel T. Byrnes

San Diego – Shirley M. Forbing
John A. Parsons

San Francisco –
Virginia Ann (Ann) Greer Shadwick
Philip Siegelman

San Jose – Mary L. Dederer
Billie B. Jensen
Tikey A. Zes

San Luis Obispo –
Adelaide T. Harmon-Elliott

It appears from the data that the percentage of workers who claim Social Security at 62 is declining, from 50% to 65% for both women and men in the 1980s until perhaps 2005 or so, to the current just over 25%. While many workers have had to leave the workforce early for a variety of reasons, others are staying in the workforce. The current average age for men claiming Social Security is about 65.

For more, including graphs, see <https://tinyurl.com/38p3w2va>

Legislative Report: Bills Affecting Undocumented, More

By Robert Girling, Sonoma, Director, Legislative Affairs

SB 307 (Cervantes, D) Public postsecondary education: immigration enforcement. As of 8/11/25, passed the Senate and passed committees in the Assembly. Existing law mandates that CSU trustees, community college district boards, and certain independent higher education institutions ensure various protections when federal immigration enforcement occurs on their campuses. This includes efforts to help undocumented students retain financial aid, stipends, and tuition exemptions if they are detained or deported and also requires that students be allowed to reenroll if they return. The bill would enhance these protections by requiring the CSU trustees and requesting the UC regents to establish systemwide policy addressing issues such as course grades, administrative withdrawal, and reenrollment for undocumented students unable to attend classes due to immigration enforcement activities.

SB 81 (Arreguín, D) Health and care facilities: information sharing. Passed the Senate and passed committees in the Assembly. The Confidentiality of Medical Information Act (CMIA) restricts health care providers, service plans, and contractors from using or disclosing medical information without patient authorization, except for necessary health services or when legally compelled, such as by a search warrant or court order. Violations that result in economic loss or personal injury to a patient are considered misdemeanors. This bill updates CMIA by expanding the definition of "medical information" to include immigration status and place of birth, thus prohibiting its use for immigration enforcement without patient

authorization or legal requirement.

Moreover, the bill requires health care providers to establish procedures for handling visitors and requests for information related to immigration enforcement. This includes notifying management when immigration enforcement seeks access to health facilities or patients. The bill mandates training for healthcare staff on handling immigration enforcement issues and prohibits unauthorized access to nonpublic areas of healthcare facilities. Health care entities have 45 days to comply with these new procedures.

AJR 5 (Lee, D) Birthright citizenship. Passed the Assembly; passed committees in the Senate. The measure expresses the legislature's disagreement with federal Executive Order 14160 seeking to end birthright citizenship. Birthright citizenship is guaranteed by the 14th amendment of the U.S. Constitution. The legislature also reaffirms its support for maintaining this constitutional right.

SB 685 (Cortese, D) California State University: financial aid for homeless students: pilot program. As of 8/13/25, passed the Senate and the Assembly Higher Education Committee. The bill proposes the establishment of a Financial Assistance for Students Experiencing Homelessness Pilot Program at three California State University campuses. This program would provide financial aid to California residents or students exempt from nonresident tuition who (1) are enrolling at one of these campuses, (2) were homeless during high school, and (3) are aged 17 to 26 when they receive the aid. Starting from the 2026–27 academic year, participating campuses must cover the difference in a qualifying student's cost of attendance not covered by other financial aid (excluding federal loans) for the first four years of the program. Students must meet specific requirements to qualify. Each campus is required to adopt policies for the program's implementation and appoint a liaison for students. The Chancellor's office must submit a report evaluating the program by December 31, 2030. The program will cease operations on July 1, 2031, and be repealed by January 1, 2032.

AB 280, (Aguilar-Curry). Health care coverage: provider directories. As of 8/13/25, passed the Assembly and the Senate Health Committee. Establishes health plan and insurer accuracy benchmarks for their provider directories, which require a plan or insurer's directories to be 60% accurate by July 2026 and 95% percent accurate by July 2029. Authorizes the Department of Managed Health Care and the Department of Insurance to require the use of a central utility or utilities for providers included in their directories. Requires a plan or insurer, when verifying the accuracy of provider information, to determine if the provider has submitted claims or has been compensated.

SB 351 (Cabaldon). Health facilities. As of 8/13/25, passed the Senate and Assembly committees. This bill would prohibit a private equity group or hedge fund, as defined, involved in any manner with a physician or dental practice doing business in this state from interfering with the professional judgment of physicians or dentists in making health care decisions and exercising power over specified actions, including, among other things, making decisions regarding coding and billing procedures for patient care services.

CSU Funding. CSU officials delivered a bleak budget outlook at the board of trustees meeting, warning that inadequate funding threatens the quality of education for students. The 2025 Budget Act (AB 102), signed by the Governor on June 27, reduces CSU's ongoing state funding by \$143.8 million — a 3% cut to its base support. University leaders say the situation is further strained by an uncertain federal budget under the Trump administration.

To help bridge the gap, the state offered CSU a one-time, interest-free \$144 million loan to meet its contractual obligations to faculty. However, CSU administrators contend that the budget shortfall gives them grounds to reopen negotiations over salary and benefit terms. Union leaders strongly disagree, accusing the university of unnecessarily backing out of

(Continued on page 7)

Pocket Calendar

The pocket calendar is currently being sent ONLY to those who have opted in - please notify the office at the email, phone, or address on page 2 if you would like to continue receiving the calendar.

However, if you have opted in already, you do not need to opt in again. You will remain on the list to receive the calendar.

Academic Freedom and the American University

Robert W. Cherny, Prof. *Emeritus* of History, San Francisco State University

Phi Beta Kappa address, San Francisco State University, May 8, 2025. This is a slightly edited copy of Prof. Cherny's Phi Beta Kappa address at San Francisco State University, May 8, 2025.

What do we mean when we talk about academic freedom? The American Association of University Professors, the leading organization for defending academic freedom in the United States, cites four major areas where academic freedom should be protected:

First, in Teaching: faculty members should have freedom to discuss all relevant matters in the classroom.

Second, in Research: researchers should have freedom to explore all avenues of scholarship, research, and creative expression and to publish the results of such work.

Third, in speech within the university: there should be freedom from institutional censorship or discipline when addressing matters of institutional policy or action.

Fourth, in speech outside the university: there should be no institutional censorship or discipline when speaking or writing as citizens.

This definition of academic freedom applies to individual faculty members, and it is limited in several ways: by professional ethics, by professional competence, and by the collective responsibility of faculty members to determine the curriculum and the delivery of the curriculum.

A series of court cases, including Supreme Court decisions, have established a related version of academic freedom for universities, as distinguished from the academic freedom of individual faculty members. Those decisions have specified that a university should be free to decide, based on academic grounds: who may teach (that is, hiring decisions), what may be taught (that is, the curriculum), how it should be taught (that is, the delivery of the curriculum, whether in lectures, labs, seminars, etc.), and who may be admitted to study (that is, student admissions decisions).

For all those university decisions, however, the expectation is that the faculty should have a major role--or the major role, because it is the faculty who carry in their heads the accumulated knowledge of their disciplines and who are therefore best situated to make decisions about the transmission and extension of that knowledge.

Some court decisions have addressed the rights of universities. For example, in 1957, Supreme Court Justice Felix Frankfurter (Phi Beta Kappa, City College of NY, 1902) wrote that intervention by governmental authorities would be deleterious to the "intellectual life" of a university. He also said that "a free society" depends on "free universities." That is, he was explicitly linking academic freedom to freedom in the nation as a whole.

How did this concept of academic freedom develop? To answer that, of course, we have to look to history. Our current under-

standing of academic freedom derives in part from the development of the first research universities in 19th-century Germany. There, Wilhelm von Humboldt created a new university, founded on two principles: the freedom of scientific inquiry and the unity between research and teaching. It became a model and inspiration for the creation of research universities elsewhere. The first such in the U.S. was the Johns Hopkins University, founded in 1876, but other, older, U.S. universities were also moving in that direction.

An event at Stanford University contributed to the formation of the American Association of University Professors--the AAUP--and its first statement about the importance of academic freedom.

Jane Stanford held the purse strings for Stanford University after the death of her husband. In the late 1890s, she told the university president to fire Edward Ross, an economics professor, because of his political speeches outside the university. Her intervention eventually led to the resignation of Ross and seven other professors--10 percent of the entire Stanford faculty! All of them went on to careers at other universities. One of them, Arthur Lovejoy, joined with John Dewey, an internationally known philosopher, to found the AAUP.

There have been many academic freedom cases since the founding of the AAUP in 1915. I've written about one of them, the case of Victor Arnautoff, who taught art at Stanford, and who was involved with activities on the left during the 1940s and early 1950s. That was the time when Senator Joseph McCarthy and the House Un-American Activities Committee were seeking to root out and destroy everything and everyone that they labeled as Communist. The California Un-American Activities Committee--yes, there was such a body in the state legislature--called Arnautoff a Communist. He had also received nationwide publicity for an unflattering cartoon of Vice President Richard Nixon. Newspapers and Stanford alumni demanded that Arnautoff be fired. Stanford's president, Wallace Sterling, had repeatedly stated that no Communist should hold a position at Stanford, and he asked the FBI for information about several Stanford faculty members including Arnautoff. Sterling interviewed Arnautoff and asked if he was a Communist. Arnautoff refused to answer on the grounds that it was no business of Sterling or the university what he did outside the university. Sterling turned the matter over to the Advisory Board, a faculty committee. They interviewed Arnautoff and recommended that no action be taken against him on the grounds that his politics had not affected his teaching.

Not all academic freedom cases have had such a good outcome. Authoritarian regimes have usually tried to control universities and their students and faculties. In China, Mao Zedong simply shut down all universities for ten years. In the Soviet Union, Joseph Stalin's government mandated an official way to teach and research biology, one that worked to the disadvantage of teaching and research in that field. In Nazi Germany, Adolph

(Continued on page 7)

'Alternative Facts' Aren't a Reason to Skip Vaccines

By Elizabeth Rosenthal, August 2025, Kaiser Health News

President Donald Trump's administrations have been notorious for an array of "alternative facts" — ranging from the relatively minor (the size of inaugural crowds) to threats to U.S. democracy, such as who really won the 2020 election.

And over the past six months, the stakes have been life or death: Trump's health officials have been endorsing alternative facts in science to impose policies that contradict modern medical knowledge. It is an undeniable fact — true science — that vaccines have been miraculous in preventing terrible diseases from polio to tetanus to measles. Numerous studies

have shown they do not cause autism. That is accepted by the scientific community.

Yet Secretary of Health and Human Services Robert F. Kennedy Jr., who has no medical background or scientific training, doesn't believe all that. The consequences of such misinformation have already been deadly. For decades, the vast majority Americans willingly got their shots — even if a significant slice of parents had misgivings. A 2015 survey found that 25% of parents believed that the measles, mumps, and rubella (MMR) vaccine could cause autism. (A 1998 study

that suggested the connection has been thoroughly discredited.) Despite that concern, just 2% of children entering kindergarten were exempted from vaccinations for religious or philosophical objections. Kids got their shots.

But more recently, poor government science communication and online purveyors of misinformation have tilled the soil for alternative facts to grow like weeds. In the 2024-25 school year, rates of full vaccination for those entering kindergarten dropped to just over 92%. In more than a

(Continued on page 9)

Academic Freedom and the American University

(Continued from page 6)

Hitler's regime ordered universities to dismiss Jewish faculty members and remove certain books from their libraries. The Nazis held public book burnings at universities. When I visited the magnificent old library at Goettingen University, I learned that, when the librarians were given the list of banned books, they resisted by hiding most of them in plain sight, by putting them out of order—for example, placing a philosophy book in the chemistry section. Score one for the librarians.

However, that won't work today, when so much information is online rather on a shelf. A recent estimate is that more than 50,000 federal webpages have been removed in the past few months. One of them was a study done by a former student of mine, a study to upgrade medals issued during World War II for soldiers of Asian parentage, who were apparently discriminated against when it came to awarding medals. The study found that some twenty-two individuals should have been awarded the Congressional Medal of Honor, and those medals were awarded by President Bill Clinton in 2000. But that article and others like it have now disappeared from Defense Department websites.

So if you read or hear that a president of a country is demanding that universities remove staff members or change policies or remove research from the web, please be alert to the danger that was laid out by

Justice Felix Frankfurter when he stated that a "free society" depends on "free universities." I'm now quoting Frankfurter:

"For society's good . . . inquiries into . . . [university research] problems, speculations about them, stimulation in others of reflection upon them, must be left as unfettered as possible. Political power must abstain from intrusion into this activity of freedom, pursued in the interest of wise government and the people's wellbeing . . . This means the exclusion of governmental intervention in the intellectual life of a university. . . . In a university, knowledge is its own end, not merely a means to an end. A university ceases to be true to its own nature if it becomes the tool of Church or State or any sectional interest."

Issues of academic freedom are as old as the concept of a research university, just as issues of civil rights and civil liberties are as old as the nation itself. Thinking about all this has reminded me of a few lines a song from 1969:

Freedom . . . is a hard-won thing,
You have to work for it, fight for it, day
and night for it,
And every generation has to win it
again.

My generation has tried to defend academic freedom and freedom more generally, and now it is your generation's turn. Please take this responsibility seriously.

Legislative Report

(Continued from page 5)

commitments and urging it to accept the state loan.

The California State University Employees Union (CSUEU) criticized CSU for "willfully looking at a glass of full funding and claiming it's half empty based on technicalities." Contracts with CSUEU, the Teamsters, and the Statewide University Police Association all include provisions that make certain raises contingent on state funding. The Teamsters, in a press release, warned they may escalate actions — "up to and including potential strike action" — if CSU fails to implement all step increases.

CalPERS. For the fiscal year ending June 30, 2025, CalPERS reported a preliminary net investment return of 11.6%, its strongest performance since 2021 and well above its 6.8% assumed long-term discount rate. This strong showing boosted the retirement fund's funded status to about 79%. Public equity delivered the highest return at 16.8%, followed by private equity at 14.3% and private debt at 12.8%, while fixed income and real assets returned 6.5% and 2.7%, respectively. Nevertheless, according to *The Financial Times*, CalPERS, the largest public pension fund in the US, signaled an appetite for more exposure to private equity despite growing concerns that these assets could expose retirees to too much risk.

Fall Book Review - *Open Turns: From Dutch Girl to New Australian - A Memoir*, by Hendrika De Vries

Reviewed By Sherry Keith, Prof. Emerita of History, SFSU

Hendrika De Vries. *Open Turns: From Dutch Girl to New Australian – A Memoir*. She Writes Press, 2025. 232 pp.

Open Turns could be the perfect, California autumn read. Chronicling the author's immigration from Amsterdam to Australia following WWII, this memoir might seem far removed from both location and life stage of CSU-ERFSA readers. Henney (Hendrika), only thirteen at the time, had already experienced the Nazi occupation in her birth city along with the absence of her father, conscripted by the Nazis but surviving the war years in a German labor camp. Just as life in Holland seems to be settling to a new normal, she is forced to leave her childhood friends, dog, and swim club to emigrate.

I hope that you will read this review to the end, even though you are far from your teenage years, never loved to swim, and may not visit the Downunder continent, because it does speak directly to us, we who call ourselves "Americans" and are bombarded with daily news demonizing immigrants, touting government perpetrated raids that defy the law and who may have neighbors, friends or even fami-

ly members whose views about immigrants infuriate us.

Henrika de Vries, retired psychotherapist and minister, lays open her own personal adolescent experience as an immigrant. Her voice and writing engender empathy and insight into people who have been forced to leave their homeland. With the immigration issue being one of the most featured news topics, immigrants have become a sharp knife cutting through our nation's dialogue, touching even tiny towns and sometimes dividing families and friends.

While Henney's family immigrated via an organized Australian government program, and some immigrants to the USA arrived or have stayed without government auspices, *Open Turns* exposes the feelings and motives of immigrants who have come as children. This memoir prods us to ask ourselves how anyone forced to leave home for a place where they know no one might feel? Henney's story takes us down this path close to those feelings.

In this respect one salient strength of *Open Turns* is the inherent honesty of its author's voice and the fidelity of that voice

to the quagmire of adolescence. Being an outsider in the Australian outback where Henney's family lands is filled with disappointment. She is taunted by her one-room school classmates for describing a fantastic "flock" of flying fish she saw on the voyage across the Indian Ocean. She lives with her parents in a dirty, isolated railroad cottage without access to what we take for granted as basic social and personal amenities.

Most important, *Open Turns* is not a story of an immigrant being crushed by circumstance. Through perseverance, initiative, and family support, Henney inches her life forward via correspondence courses, disappointing jobs, and even a brush with sexual harassment. Without fail, she clutches her dreams of belonging and returning to a swimming pool. Years later, in Adelaide, she finds the pool and will become an Australian swimming champion. But her story's strength isn't in the championship. It's in a tone of compassion and self-reflection that helps the reader understand someone who seems so different from oneself. This is an endearing and informative read for we retirees as well as our adolescent family and friends.

Health Benefits Report: Drug Manager to Change

(Continued from page 1)

future prescriptions filled at their current pharmacy.

There will be some formulary changes, but they are expected to be minor. There will be a transition period to address such cases when they occur. Letters from CalPERS and CVS Caremark explaining these changes in detail should be going out to members in August and early September.

Health Premium Increases for 2026.

As this report was going to press, CalPERS announced its health plan premiums for 2026. Overall the weighted monthly premium rate increase will be

8.21%. The more specific increases for different plans will be as follows: Basic (non-Medicare) plans will average a 7.76% increase. Members of CalPERS basic HMO plans: 6.48% increase; and Preferred Provider Organization (PPO) Basic plans will average 12.08% Medicare plan premiums should see an average 10.78% increase overall. Rising costs across the health care landscape, particularly pharmacy costs, are a major driver behind the increases.

2026 Open Enrollment. It's now August, which means that the "Open Enrollment" period for 2026 health plans will shortly get underway. The period this year extends from September 18th thru October 10th. For anyone thinking about

making changes to their coverage you should begin reviewing your options as soon as possible. If you intend to change plans, remember that coverage under your current plan ends on December 31, 2025. Prepare accordingly with a sufficient stockpile of prescription medications and the completion of any time-sensitive lab tests and procedures. CalPERS has a webinar on it: Wednesday 9/15 at 11 a.m. for one hour. Check out the CalPERS website for more info.

The effective date of the change to your new plan will be January 1, 2026. Check to determine if you need to reschedule appointments. Your new health plan, not CalPERS, is responsible for sending out your new membership identification cards.

'Alternative Facts' Aren't a Reason to Skip Vaccines

(Continued from page 7)

dozen states, the rate was under 90%, and in Idaho it was under 80%. And now we have a stream of measles cases, more than 1,300 from a disease declared extinct in the U.S. a quarter-century ago.

It's easy to see how both push and pull factors led to the acceptance of bad science on vaccines.

The number of recommended vaccines has ballooned this century, overwhelming patients and parents. That is, in large part, because the clinical science of vaccinology has boomed (that's good). And in part because vaccines, which historically sold for pennies, now often sell for hundreds of dollars, becoming a source of big profits for drugmakers.

In 1986, a typical child was recommended to receive 11 vaccine doses — seven injections and four oral. Today, that number has risen to between 50 and 54 doses by age 18. The Advisory Committee on Immunization Practices, which renders judgments on vaccines, makes a scientific risk-benefit assessment: that the harm of getting the disease is greater than the risk of side effects. That does not mean that all vaccines are equally effective, and health officials have done a lackluster job of fostering public understanding of that fact.

Older vaccines — think polio and measles — are essentially 100% effective; diseases that parents dreaded were wiped off the map. Many newer vaccines, though recommended and useful (and often heavily advertised), don't carry the same emotional or medical punch. Parents of the current generation haven't experienced how sick a child could be with measles or whooping cough, also called pertussis. Mothers didn't really worry about hepatitis B, a virus generally transmitted through sex or intravenous drug use, infecting their child.

That lack of understanding spawned skeptics. For example, since 2010, the vaccine for influenza, which had been around for decades, has been recommended annually for all Americans at least 6 months old. In the 2024-25 season, the rate of flu vaccination was only between 36% and 54% in adults; in other years, it has been lower than that. "I got the flu vaccine, and I still got the flu" has been a common refrain of

skeptics.

"Pre-covid, there were people who took everything but flu," said Rupali Limaye, an associate professor at Johns Hopkins University's Bloomberg School of Public Health, who studies vaccine demand and acceptance. "Then it became everything but covid. Now it's everything — including MMR and polio."

Even as the first Trump administration's Operation Warp Speed helped develop covid vaccines, conservative media outlets created doubts that the shots were needed: doubts that mRNA technology had been sufficiently tested; doubts that covid-19 was bad enough to merit a shot; concerns that the vaccines could cause infertility or autism.

Trump did little to correct these dangerous misperceptions and got booed by supporters when he said that he'd been vaccinated. Once vaccine mandates came into play, Trump strongly opposed them, reframing belief in the vaccine as a question of personal liberty. And if the government couldn't mandate the covid shot for school, it followed that officials shouldn't — couldn't — mandate others.

Thus 100 years of research proving the virtues of vaccination got dropped into a stew of alternative facts. You were either pro- or anti-vaccine, and that signaled your politics. Suddenly, the anti-vax crowd was not a small fringe of liberal parents, but a much larger group of conservative stalwarts who believed that being forced to vaccinate their kids to enter school violated their individual rights.

Even within the Trump administration, there have been some who (at least partly) decried the trend. While Marty Makary, the Food and Drug Administration commissioner, defended Kennedy's decision to roll back the recommendation that all Americans get annual covid boosters — saying the benefits were unproven — he noted it should not be a signal to stop taking other shots. As "public trust in vaccination in general has declined," he wrote, the reluctance to vaccinate had harmed "vital immunization programs such as that for measles-mumps-rubella (MMR) vaccination, which has been clearly established as safe and highly effective."

Nonetheless, Makary's boss, Kennedy, continued to promote bad science about vac-

cines broadly, even as he sometimes grudgingly acknowledged their utility in cases like a measles outbreak. He has funded new research on the already disproven link between MMR shots and autism. He has halted \$500 million in grants for developing vaccines using mRNA technology, the novel production method used for the first covid vaccines and a technique scientists believe holds great promise for preventing deaths from other infectious diseases.

In my 10 years practicing as a physician, I never saw a case of measles. Now there are cases in 40 states. More than 150 people have been hospitalized, and three, all unvaccinated, have died. Alternative facts have formed what David Scales, a physician and sociologist at Weill Cornell Medical College who studies misinformation, calls "an unhealthy information system."

It is an alternative scientific universe in which too many Americans live. And some die.

CSU-ERFSA New Members

A very warm welcome to our newest CSU-ERFSA members:

Channel Islands – Robert Bleicher
Nancy Deans
Cynthia L. Sherman

Fullerton – Janice Myck-Wayne
Rosario (Rose) Sakamoto

Humboldt – Mary E. Glenn

Long Beach – Scott W. Flexo

San Francisco – Elizabeth Whalley

San Marcos – Michael Yee

San Diego – Alex F. Denoble
Nancy J. Farnan

Sonoma – Anne Goldman
Haidee Kathleen Winter

Activities of Daily Living (ADLs): An Explanation

By Ted Anagnoson, Editor, Los Angeles

In the last issue, the long-term care article alluded to the activities of daily living (ADL) as major predictors of whether patients will need what are now called “long-term services and supports” (LTSS). We promised you a comprehensive report on ADLs. Where I indicate experience with the CalPERS long-term care program, that experience is from the fall of 2024 when my spouse entered a board and care home for memory care. Here we go:

ADLs come in two kinds.

1. **Basic or physical ADLs.** 6-8 skills that you need to manage your physical needs, dressing, going to the bathroom, walking, eating, etc.

2. **Instrumental ADLs (IADLs).** Things like shopping, paying your bills, doing housekeeping and the laundry, etc.

You can lose the ability to do many of your IADLs without having basic ADL problems – when my father entered a nursing home in Boston in 2001, his IADLs were a mess (bills unpaid, purchase of 6 kinds of ice cream and 4 kinds of laundry detergent, etc.), but he had the ability to do all but one of the basic ADLs. In general, most programs will accept you with dementia even if you can do all or most of your ADLs, or at least that has been my experience.

Basic ADLs. ADLs were first proposed by Sidney Katz in 1950. The following six are pretty standard (and from a National Library of Medicine article; reference below), but you’ll find small differences in different states, programs, or institutions.

- **Ambulating:** The extent of an individual’s ability to move from one position to another and walk independently.
- **Feeding:** The ability of an individual to feed oneself.
- **Dressing:** The ability to select appropriate clothes and to put them on.
- **Personal hygiene:** The ability to bathe and groom oneself and maintain dental hygiene, nail, and hair care.
- **Continence:** The ability to control bladder and bowel function.
- **Toileting:** The ability to get to and from the toilet, use it appropriately, and clean oneself afterward.

With the CalPERS Long-Term Care program, to put your spouse or loved one on

“claim status” (that is, he or she is going into a memory care, assisted living, or nursing home situation because of dementia), you indicate the current level of assistance the claimant needs in each category ranging from “no assistance is provided because the claimant is independent” to “unable to participate in any part of the ADL.” The categories are the same except for the addition of “Mobility/Ambulation (indoors only).”

IADLs. These generally require more thinking, planning, and organizing. Here’s a classic list :

- **Transportation:** The ability to plan for and manage transportation, either by driving or by organizing other means of transport.
- **Managing finances:** The ability to pay bills and manage financial assets.
- **Shopping:** The ability to organize and be aware of needed items and procure them, such as maintaining adequate groceries in the home for sustenance or shopping for necessary clothing and other products.
- **Meal preparation:** The ability to manage everything required to prepare a meal, including safely operating cooking devices and food storage needs.
- **Housecleaning and home maintenance:** The ability to clean dishes after eating, maintain living areas in a reasonably clean and tidy state, and keep up with home maintenance.
- **Managing communication with others:** The ability to manage telephone and mail.
- **Managing medications:** The ability to obtain medications and take them correctly as directed.

For the CalPERS long-term care program, I had to state whether my spouse needed assistance “for the following Instrumental Activities of Daily Living.” For each, you indicate yes/no and comment on the kind of assistance needed.

- Housekeeping
- Laundry
- Meal preparation
- Medication reminders
- Money management
- Shopping
- Social companionship
- Telephone use
- Transportation

- Other. Please specify:

In addition, for the CalPERS long-term care program, another page asks about cognitive impairment: “Is there a known formal diagnosis of memory loss, cognitive impairment or dementia?” Further questions ask whether formal cognitive testing has been completed, and whether any medications have been taken for memory loss, cognitive impairment or dementia.

A good source for further information is: Edemekong, Peter F., et. al. *Activities of Daily Living*. National Library of Medicine, updated May 4, 2025. <https://tinyurl.com/4z96vmna>. There are useful articles also on the Wikipedia and WebMD.

The 4% Rule and its Variations

The NYT published an article in mid-July about taking your money out in retirement. How much to take out, and when? It’s entitled “You’ve Saved and Saved for Retirement. Now You Need a Plan to Cash Out” (July 12, 2025) and available at this location: <https://tinyurl.com/ydmy75kt>.

It’s gated, but it is worth reading.

They start with the 4% rule (if you don’t know what this is, you *really* need to read this article) and go on to discuss the circumstances when you might want to follow it and might want to avoid it. The central focus is on people who have a large 401(k) and no defined benefit pension, but the rules apply to those of us who retire with a strong defined benefit pension and some supplemental money saved.

One consideration is whether you have long-term care insurance; if not, that sum you have saved might well keep you solvent in your 70s or 80s.

If you have trouble getting access, let the editor know, and we can send you a PDF.

Immigration Crackdowns Disrupt the Caregiving Industry

By Vanessa G. Sanchez and Daniel Chang, April 2025, KFF Health News

Venezuelan immigrant Alanys Ortiz has been Josephine Senek's caregiver for more than two years, but Ortiz's authorization to legally live and work in the U.S. is now in question and she could be forced to leave or risk detention and deportation. Josephine, 16, has been diagnosed with tetrasomy 8p mosaicism, severe autism, severe obsessive-compulsive disorder, and attention-deficit/hyperactivity disorder, among other conditions, which will require constant assistance and supervision for the rest of her life.

Ortiz, 25, is Josephine's caregiver. A Venezuelan immigrant, Ortiz helps Josephine eat, bathe, and perform other daily tasks that the teen cannot do alone at her home in West Orange, New Jersey. Over the past 2½ years, Ortiz said, she has developed an instinct for spotting potential triggers before they escalate. She closes doors and peels barcode stickers off apples to ease Josephine's anxiety.

But Ortiz's ability to work in the U.S. has been thrown into doubt by the Trump administration, which ordered an end to the temporary protected status program for some Venezuelans on April 7. On March 31, a federal judge paused the order, giving the administration a week to appeal. If the termination goes through, Ortiz would have to leave the country or risk detention and deportation. "Our family would be gutted beyond belief," said Krysta Senek, Josephine's mother, who has been trying to win a reprieve for Ortiz.

Americans depend on many such foreign-born workers to help care for family members who are older, injured, or disabled and cannot care for themselves. Nearly 6 million people receive personal care in a private home or a group home, and about 2 million people use these services in a nursing home or other long-term care institution, according to a Congressional Budget Office analysis.

Increasingly, the workers who provide that care are immigrants such as Ortiz. The foreign-born share of nursing home workers rose three percentage points from 2007 to 2021, to about 18%, according to an analysis of census data by the Baker Institute for Public Policy at Rice

University in Houston.

And foreign-born workers make up a high share of other direct care providers. More than 40% of home health aides, 28% of personal care workers, and 21% of nursing assistants were foreign-born in 2022, compared with 18% of workers overall that year, according to Bureau of Labor Statistics data. That workforce is in jeopardy amid the immigration crackdown President Donald Trump launched on his first day back in office. He signed executive orders that expanded the use of deportations without a court hearing, suspended refugee resettlements, and more recently ended humanitarian parole programs for nationals of Cuba, Haiti, Nicaragua, and Venezuela.

In invoking the Alien Enemies Act to deport Venezuelans and attempting to revoke legal permanent residency for others, the Trump administration has sparked fear that even those who have followed the nation's immigration rules could be targeted. "There's just a general anxiety about what this could all mean, even if somebody is here legally," said Katie Smith Sloan, president of LeadingAge, a nonprofit representing more than 5,000 nursing homes, assisted living facilities, and other services for aging patients. "There's concern about unfair targeting, unfair activity that could just create trauma, even if they don't ultimately end up being deported, and that's disruptive to a health care environment."

Shutting down pathways for immigrants to work in the United States, Smith Sloan said, also means many other foreign workers may go instead to countries where they are welcomed and needed. "We are in competition for the same pool of workers," she said.

Growing Demand as Labor Pool Likely To Shrink. Demand for caregivers is predicted to surge in the U.S. as the youngest baby boomers reach retirement age, with the need for home health and personal care aides projected to grow about 21% over a decade, according to the Bureau of Labor Statistics. Those 820,000 additional positions represent the most of any occupation. The need for nursing assistants and orderlies also is projected

to grow, by about 65,000 positions.

Caregiving is often low-paying and physically demanding work that doesn't attract enough native-born Americans. The median pay ranges from about \$34,000 to \$38,000 a year, according to the Bureau of Labor Statistics. Nursing homes, assisted living facilities, and home health agencies have long struggled with high turnover rates and staffing shortages, Smith Sloan said, and they now fear that Trump's immigration policies will choke off a key source of workers, leaving many older and disabled Americans without someone to help them eat, dress, and perform daily activities.

With the Trump administration reorganizing the Administration for Community Living, which runs programs supporting older adults and people with disabilities, and Congress considering deep cuts to Medicaid, the largest payer for long-term care in the nation, the president's anti-immigration policies are creating "a perfect storm" for a sector that has not recovered from the covid-19 pandemic, said Leslie Frane, an executive vice president of the SEIU, which represents nursing facility workers and home health aides. The relationships caregivers build with their clients can take years to develop, Frane said, and replacements are already hard to find.

In September, *LeadingAge* called for the federal government to help the industry meet staffing needs by raising caps on work-related immigration visas, expanding refugee status to more people, and allowing immigrants to test for professional licenses in their native language, among other recommendations. But, Smith Sloan said, "There's not a lot of appetite for our message right now."

The White House did not respond to questions about how the administration would address the need for workers in long-term

Refugees Fill Nursing Home Jobs in Wisconsin. Until Trump suspended the refugee resettlement program, some nursing homes in Wisconsin had partnered with local churches and job placement

(Continued on page 12)

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California State University Emeritus & Retired Faculty and Staff Association

12

CSU-ERFSA Reporter September 2025

Immigration Crackdowns and Caregiving

(Continued from page 11)

programs to hire foreign-born workers, said Robin Wolzenburg, a senior vice president for *LeadingAge Wisconsin*.

Many work in food service and housekeeping, roles that free up nurses and nursing assistants to work directly with patients. Wolzenburg said many immigrants are interested in direct care roles but take on ancillary roles because they cannot speak English fluently or lack U.S. certification.

Through a partnership with the Wisconsin health department and local schools, Wolzenburg said, nursing homes have begun to offer training in English, Spanish, and Hmong for immigrant workers to become direct care professionals.

Many older and disabled immigrants who are permanent residents rely on foreign-born caregivers who speak their native language and know their customs. Frane with the SEIU noted that many members

of San Francisco's large Chinese American community want their aging parents to be cared for at home, preferably by someone who can speak the language. "In California alone, we have members who speak 12 different languages," Frane said. "That skill translates into a kind of care and connection with consumers that will be very difficult to replicate if the supply of immigrant caregivers is diminished."

The Ecosystem a Caregiver Supports. Caregiving is the kind of work that makes other work possible, Frane said. Without

outside caregivers, the lives of the patient and their loved ones become more difficult logistically and economically. "Think of it like pulling out a Jenga stick from a Jenga pile, and the thing starts to topple," she said. Thanks to the one-on-one care from Ortiz, Josephine has learned to communicate when she's hungry or needs help. She now picks up her clothes and is learning to do her own hair.

For more on this topic, see <https://tinyurl.com/yw4hf89w>

CSU-ERFSA Calendar of Events

Aug. 29 - Sept. 29 - CalPERS Board of Administration Election. CSU-ERFSA endorses Dominick Bei and Jose Luis Pacheco in the election. Story p. 1.

Sept. 18 - Oct. 10 - Open Enrollment for CalPERS health plans. New plans selected take effect 1/1/26.

Thursday, October 30, 2025 - CSU-ERFSA Research Grant Applications due. 2 p.m.

Jan 21, 2026 - 10 a.m. - 12 p.m. CSU-ERFSA Executive Committee meeting on Zoom