MEMO

DATE:	April 26, 2022
SUBJECT:	**AB 567 Task Force Meeting 11 questionnaire (LTSS workforce)**

This questionnaire will be distributed to all Task Force Members to complete in advance of California Assembly Bill ("AB") 567 Long-Term Care ("LTC") Insurance Task Force Meeting 11 on May 5, 2022. The purpose of this questionnaire is to independently collect Task Force Members' **preliminary** recommendations concerning the following **five** elements of a potential statewide LTC insurance program that relate to the **Long-Term Services and Supports ("LTSS") workforce**:

1. Demand and supply
2. Qualifications and training
3. Formal vs. informal care
4. Wages
5. Diversity

We will discuss the results of this questionnaire during Task Force Meeting 11, and Task Force Members will have the opportunity to clarify and revisit their recommendations during that discussion.

The five program elements covered in this questionnaire were deliberated at Task Force Meeting 10 (April 21, 2022). We recommend that you reference the educational materials from this meeting as you make your selections.

We ask that Task Force Members come prepared to explain their questionnaire selections and provide their perspectives on the aggregate results of this questionnaire at the upcoming Task Force Meeting.

The public may submit a response to the questionnaire by completing this fillable PDF and submitting it via email (CDIBoards@insurance.ca.gov).

QUESTIONNAIRE

Name (optional): ____________________________

LTSS workforce questions

1. Should the program cover services provided by PACE (Program of All-Inclusive Care for the Elderly)? [Presentation 10.B: page 13]

   a. *Multiple-choice options:*

      ◯ *i. No*

      ◯ *ii. Yes, paid for through **certified provider reimbursement***

      ◯ *iii. Yes, paid for through **cash benefits***

      *(**Note**: question 13 of the Task Force Meeting 7 questionnaire indicates that Task Force respondents are preliminarily leaning towards reimbursement benefits with a <u>reduced</u> cash benefit)*

   b. *Please explain your response:*

      ____

2. Should the program provide financial support to informal/family caregivers? [Presentation 10.E: pages 6-9]

   a. *Multiple-choice options:*

      ◯ *i. No*

      ◯ *ii. Yes, paid through **certified provider reimbursement***

      *(**Note**: a process would be needed to be established to enable informal caregivers to become certified providers, such as the case for Medi-Cal IHSS and WA Cares Fund)*

      ◯ *iii. Yes, paid through **cash benefits***

      *(**Note**: question 13 of the Task Force Meeting 7 questionnaire indicates that Task Force respondents are preliminarily leaning towards reimbursement benefits with a <u>reduced</u> cash benefit)*

   b. *Please explain your response:*

      ____

3. What recommendations would you like to make in conjunction with AB 567 to address existing and potential challenges concerning the LTSS workforce? (Please indicate up to five recommendations, in order of importance) [Presentation 10.C, Presentation 10.D, Presentation 10.E]

   (**Note: please limit your recommendations to those within the confines of AB 567**. As a reminder, AB 567 specifies that the Task Force should "evaluate the demands on the long-term care workforce as the need for long-term care in California grows, and how the long-term care workforce can be prepared to meet those demands")

   a. *Recommendation 1 (higher importance; more immediate need):*

   b. *Recommendation 2:*

   c. *Recommendation 3:*

   d. *Recommendation 4:*

   e. *Recommendation 5 (lower importance; less immediate need):*

Follow-up questions from prior Task Force meetings

The questions in this section are intended to (i) gain additional clarity on questions from previous questionnaires and/or (ii) gain additional insight on program design elements that the Task Force has not yet reached a preliminary consensus on.

4. With regard to **equity**, should there be an upper limit on program contributions (e.g., an upper limit on level of wages subject to a payroll tax)? [Presentation 8.B]
   *(**Note**: question 1 of the Task Force Meeting 9 questionnaire indicates that the Task Force is preliminarily leaning towards program contributions that vary by level of wages or income (i.e., higher for higher-income individuals, lower or zero for lower-income individuals))*

   a. *Multiple-choice options:*

      ○ *i. No*

      ○ *ii. Yes*

   b. *Please explain your response:*

5. Please clarify your recommended **contribution rate structure** [Presentation 8.E: pages 11-14]

   *(**Note**: question 10 of the Task Force Meeting 9 questionnaire indicates that 70% of Task Force respondents are preliminarily leaning towards a varied contribution rate structure, however, we understand from subsequent discussions that additional clarity on this question was needed. We also split the question into two parts)*

   Part I

   Should the program contribution rate be level or step-rated over time?

   a. *Multiple-choice options:*

      ◯ i. *Level (i.e., the program contribution rate is not intended to increase as the statewide LTC insurance program ages)*

      ◯ ii. *Step-rated (i.e., the program contribution rate will increase in <u>planned increments</u> as the statewide LTC insurance program ages)*

   b. *Please explain your response:*

      ____

   Part II

   Should the program contribution rate vary for individuals as they age?

   a. *Multiple-choice options:*

      ◯ i. *No*

      ◯ ii. *Yes, the contribution rate should **decrease** with an individual's age*

      ◯ iii. *Yes, the contribution rate should **increase** with an individual's age*

   b. *Please explain your response:*

      ____

6. Would you recommend a reduced program contribution requirement* in lieu of an opt-out provision for individuals who own eligible private LTC insurance policies (criteria for "eligible" to be determined **and would consider both supplemental and substitutive insurance coverage**)? [Presentation 5.C: pages 18-19]

   *(**Note**: question 13A of the Task Force Meeting 9 questionnaire indicates that the Task Force is split between having an opt-out provision or reduced program contributions for individuals with eligible private LTC insurance and it was suggested that treatment could differ between those with private LTC insurance in place before vs. after program enactment)*

   a. *Multiple-choice options:*

	Eligible private insurance purchased **before** program enactment	Eligible private insurance purchased **after** program enactment
i. *Include an opt-out provision for these individuals*	○	○
ii. *Offer reduced program contributions* for these individuals*	○	○
iii. *Do not include special provisions for these individuals*	○	○

   b. *Please explain your response:*

   ____

   ** This means that individuals with eligible private LTC insurance policies will still be part of the program, and would be able to use program benefits upon satisfaction of eligibility requirements*

7. With regard to **portability**, should benefit eligible individuals be allowed to use portable program benefits outside of the U.S. (i.e., internationally)? [Presentation 5.C: pages 11-12] *(**Note**: question 4A of the Task Force Meeting 7 questionnaire indicates that 89% of Task Force respondents are preliminarily leaning towards program benefits that are at least partially portable; i.e., individuals should be allowed to use benefits outside California)*

   a. *Multiple-choice options:*

      - ○ *i. No, only allow benefits to be used within California (i.e., non-portable)*
      - ○ *ii. No, only allow portability within the U.S.*
      - ○ *iii. Yes, allow international portability at the **same level** as portable benefits used within the U.S.*
      - ○ *iv. Yes, allow international portability but at a **reduced level** compared to portable benefits used within the U.S.*

   b. *Please explain your response:*

      ____

8. In light of the current (preliminary) preference to finance the program primarily via a payroll tax, which would exclude spouses and domestic partners that are not on payroll, has your preliminary recommendation regarding family or spousal coverage changed? Please specify your preference below. [Presentation 5.C: pages 15-16]

   *(**Note**: question 4A of the Task Force Meeting 9 questionnaire indicates that the Task Force is preliminarily leaning towards financing the program with payroll tax and question 5 of the Task Force Meeting 7 questionnaire indicates that Task Force respondents preliminarily have a slight preference to extend program coverage to an individuals' spouse or domestic partner with a higher program contribution required from the individual, if their spouse or domestic partner is otherwise unable to participate in the program)*

   Part I

   Should the program include a provision that allows individuals to extend their program benefits to their spouse/domestic partner and/or other family members that are otherwise excluded from the program because of the chosen financing option?

   a. *Multiple-choice options:*

      ◯ *i. No (i.e., individual coverage only; dependents would need to satisfy their own requirements to be eligible for benefits under the program)*

      ◯ *ii. Yes, through a **separate benefit pool***

      ◯ *iii. Yes, through a **shared benefit pool***
      *(**Note**: under a "**separate benefit pool**" design, each covered family member would have access to their own pool of program benefits. Under a "**shared benefit pool**" design, all covered family members would share one pool of program benefits. The "separate benefit pool" option provides greater coverage and is more costly. To access benefits under either option, family members must meet benefit eligibility criteria and the contributing individual must meet vesting requirements)*

      ◯ *iv. Other (please specify):*

      ____

   b. *Please explain your response:*

      ____

Part II

If the program includes a provision that allows an individual to extend coverage to their family members, which family members should the extension apply to?

a. Multiple-choice options:

- ◯ *i. None (i.e., individual coverage only)*
- ◯ *ii. Spouses or domestic partners*
- ◯ *iii. Spouses or domestic partners and any dependent children (subject to program benefit eligibility age requirements)*
- ◯ *iv. All extended family (e.g., including an individuals' elderly parents; subject to program benefit eligibility age requirements)*
- ◯ *v. Other (please specify):*

____

b. *Please explain your response:*

____

9. In light of the current preference to finance the program primarily via a payroll tax, should the program design include a mechanism by which to extend coverage to individuals excluded from the program as a result of the chosen financing option?
*(**Note**: question 4A of the Task Force Meeting 9 questionnaire indicates that the Task Force is preliminarily leaning towards financing the program with payroll tax)*

a. Multiple-choice options:

- ◯ *i. Yes, offer a non-voluntary alternative program contribution option (e.g., premiums) for those unable to contribute via the primary financing mechanism*
- ◯ *ii. Yes, offer a voluntary alternative program contribution option (e.g., premiums) for those unable to contribute via the primary financing mechanism*
  *(**Note**: question 8 of the Task Force Meeting 7 questionnaire indicates that Task Force respondents are preliminarily leaning towards **not** having any opt-in/buy-in (i.e., no voluntary) options)*
- ◯ *iii. No (i.e., if individuals cannot contribute via the chosen financing option, they will not be program eligible)*

b. Please explain your response:

____

10. In light of the current preference to finance the program primarily via a payroll tax, should the program design include a mechanism by which to extend coverage to individuals excluded from the program because they are not able to fully vest (e.g., near retirees) given the chosen financing option?
    *(**Note:** question 4A of the Task Force Meeting 9 questionnaire indicates that the Task Force is preliminarily leaning towards financing the program with payroll tax)*
    a. *Multiple-choice options:*
        - ◯ i. *Yes, offer a non-voluntary alternative program contribution option (e.g., premiums) for those unable to fully vest via the primary financing mechanism*
        - ◯ ii. *Yes, offer pro-rated benefits to those unable to fully vest via the primary financing mechanism (i.e., benefits are reduced to a level that is proportionate with the amount of the vesting period the individual is able to satisfy)*
        - ◯ iii. *Yes, offer pro-rated benefits **and** a voluntary alternative program contribution option (e.g., premiums) to "top up" their benefits for those unable to fully vest via the primary financing mechanism (i.e., benefits are reduced to a level that is proportionate with the amount of the vesting period the individual is able to satisfy unless an individual voluntarily elects to pay additional program contributions to qualify for the full benefit amount)*
        - ◯ iv. *No (i.e., if individuals cannot fully vest via the chosen financing option, they will be excluded from the program so as to not require them to pay in without being able to receive benefits)*
        - ◯ v. *Other (please specify):*

    b. *Please explain your response:*