## <u>LTCI Task Force – Work Breakdown and Considerations</u>

Note: This draft deliberative chart is not meant to be comprehensive at this point, but is merely a starting point for Task Force discussion and will be built upon as discussions progress. Each column is not independent, but should be considered in concert with each of the other categories. The overarching goal of the Task Force should remain true to the intent of the Legislature in passing Assembly Bill 567: "To enact legislation establishing a task force to explore the feasibility of developing and implementing a culturally competent statewide insurance program for long-term care services and supports."

Structure Options	Financing	Administrative	Workforce	Services	Coordination/Interaction	Access
'	J	Considerations				
Public Benefit	Payroll tax	Eligibility	Needs/demands	Nonmedical	Private health	Culturally
(e.g., add an LTC	(Addition to SDI	(age, ADL criteria,		Supports and	insurance and	responsive
benefit to State	assessment rate or	vesting, divesting, family	Qualifications/	Services	Medicare	services and
Disability	new assessment)	or spousal coverage)	licensing/	(personal care,	(home health care,	outreach
Program	General Fund		certification	homemaker	hospice services,	
	General Fund	Enrollment		services, home	palliative care,	Care coordination
Joint	Excise tax	(mandatory, mandatory	Family caregivers	modification)	prevention & wellness	
public/private	(assessed on	w/ opt-out, or voluntary;			programs)	Streamlined
system	purchase of certain	self-employed opt-in;		Extended home		assessment
(e.g., subsidized	goods)	retiree buy-in; tax and/or		health care	Medi-Cal program and	
insurance		benefit exclusion for low			other publicly funded	Navigation of
options,	Local funds	income)		Respite care	resources	state LTSS
expanded	(counties, cities, hospital districts)					system
partnership	nospital districts)	Benefits		Family caregiver	Other state program	
options)	Premiums	(lifetime amount,		training/support	efforts (e.g. Master	
	(For private	daily/monthly amount,			Plan on Aging)	
Hybrid (e.g.,	insurance or self-	inflation rate, elimination		Adult daycare	F 1 TO. 1	
public benefit with	employed or retiree	period, cash or		<b>D</b>	Existing LTCi and new	
option to	buy-in options)	reimbursement)		Residential care	sales of LTCI	
purchase	Chara of soot	A		facilities	(primary or secondary	
additional	Share of cost	Administration		Nii	coverage to private	
coverage)	Provider fees &	(responsible agency or		Nursing facilities	LTCI; premium reduction or benefit	
	taxes (hospitals,	agencies, governance,		Draventies (fell		
	nursing facilities,	oversight)		Prevention (fall	increase for existing LTCI policies - see Ins.	
	intermediate care			prevention, electronic	Code 10235.91)	
	facilities, other			monitoring,	Code 10233.91)	
	providers, MCOs)			wellness	Federal Reforms	
				programs)	Cuciai Neioiiiis	
				i programs <i>)</i>		