

CALIFORNIA DEPARTMENT OF INSURANCE: LONG TERM CARE INSURANCE PROGRAM

Preliminary Task Force Member Questionnaire Results

QUALIFICATIONS, ASSUMPTIONS AND LIMITING CONDITIONS

Oliver Wyman was commissioned by the California Department of Insurance to provide support associated with assessing the feasibility of developing and implementing a culturally competent statewide insurance program for long-term care services and supports (LTSS). The primary audience for this report includes stakeholders from the California Department of Insurance, members of the Long-Term Care Insurance Task Force, and members of the general public within the state of California.

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EXECUTIVE SUMMARY

Task Force Members were asked to complete a questionnaire regarding their <u>preliminary</u> views of a potential LTSS program in California as part of AB #567. Task Force Member views may (and will likely) evolve as detailed discussions progress across the <u>seven Work Plan elements</u>. This page summarizes the questionnaire results; all subsequent pages contain questionnaire responses verbatim

	Key Takeaways
1	Critical program features: Flexibility; affordability; accessibility; qualification regardless of race, economic status, gender; and a broad range of service offerings were identified as being critical elements of a fair and equitable program
2	Financial responsibility: Most respondents felt that the government should take at least 50% responsibility for financing costs associated with aging and long-term care needs. However, one respondent felt that the government should only take 10% responsibility
3	Eligible individuals: Respondents unanimously agreed that the elderly should be eligible for LTSS under the program and most felt employment status should not be used as criteria for eligibility. Preferences were mixed for juveniles, non-elderly, currently disabled (prior to program implementation), unhoused, and undocumented
4	Eligibility period: Most respondents believe a specified waiting period should be met, though results varied by group. Almost no respondents felt that eligibility should require asset spend down
5	Financing for eligible groups: For those groups perceived as being unable to fund their own care, most respondents felt the government should finance care. Otherwise, results were mixed and generally indicated a preference to finance costs through a combination of means
6	Role of private insurance: Respondents believe private insurance should work hand-in-hand with public programs
7	Success of private insurance: Respondents believe public programs have been more successful in providing for aging and long-term care needs than private insurance
8	Pitfalls of private and government insurance: Common themes amongst responses include (1) private insurance not being accessible/affordable to all and (2) education surrounding coverage and general costs of care needing improvement
9	Hurdles for success: Respondents feel that financing is the largest hurdle for the success of a state-wide LTSS insurance program in California. Mandatory enrollment, affordable payroll taxes and varying levels of coverage were all identified as potential mitigating steps
10	Other LTSS financing initiatives: All respondents were aware of President Biden's \$400 Billion LTC proposal as a part of the American Jobs Plan, and at least half were aware of Washington's WA Cares Fund, Hawaii's Kūpuna Caregivers Program, and Senator Thomas Suozzi's proposed Well-Being Insurance for Seniors to be at Home (WISH) Act
11	Addressing opposition: Respondents believe that education, transparency, and meaningful public engagement are necessary to address anticipated opposition to California's program design and financing

What are three (3) or more program features that you feel are critical in ensuring that the program is considered "equitable" or "fair"?

#	Program feature 1	Program feature 2	Program feature 3	Other features
1	"Affordable" options for those of limited financial means (low-wage earners and/or those who aren't working any more)	addresses caregiver component (lay and access to paid; care coordination)	culturally competency	access to adult day care services (for respite)
2	Affordable	Easily assessable	Mitigates racial biases	
3	Affordable (e.g., lower cost for individuals at lower income levels)	Culturally competent	Covers range of home and community based services	Promotes workforce development
4	Racial Justice	Economic Justice	Gender Justice	Social Insurance
5	Home and community based	Assistance with Daily Living Task - Need based.	Focused on the elderly population	Vesting Requirement to participate and a daily benefit amount with a cap
6	Access to all who desire to participate	Not on the backs of small employers	Includes broad service offerings including outpatient, home care hospice and other services ie therapy	
7	needs-based (financial and medical/functional)	accessible to underprivileged populations		
8	see other features	see other features	see other features	There has not been enough discussion on guideline principles to call out critical program features or clarity of what program features means in this context. For example, this could as specific as benefit design elements or as broad as integration with other public programs. We should also discuss the principles of fairness and equity in the context of cultural competency in California.

What do you view as the appropriate/ideal role for the government (state and federal) versus the individual consumer with regard to financing costs associated with aging and long-term care needs? Use the sliding the scale to indicate the percentage of responsibility you feel the government should have (the complement being the individual consumer's responsibility).

Response #	Response
1	60%
2	10%
3	75%
4	90%
5	100%
6	50%
7	50%
8	80%

Minimum	Maximum	Mean	Count
10%	100%	64%	8

Which of the following "groups" of California's population do you feel should be eligible for long-term services and supports (LTSS) under the program? Please note, each group identified is not intended to be mutually exclusive and may overlap with other groups listed.

		Yes – Eligible		No - Not eligible		Unsu	Unsure	
#	Question	Percentage	Count	Percentage	Count	Percentage	Count	Count
1	Juveniles (i.e., individuals under the age of 18)	38%	3	62%	5	0%	0	8
2	Elderly (i.e., individuals aged 65 and older)	100%	8	0%	0	0%	0	8
3	Non-elderly adults (i.e., individuals aged 18 through 64)	75%	6	25%	2	0%	0	8
4	Employed individuals (part-time)	100%	8	0%	0	0%	0	8
5	Employed individuals (full-time)	100%	8	0%	0	0%	0	8
6	Unemployed individuals	88%	7	0%	0	12%	1	8
7	Currently disabled individuals (i.e., those disabled prior to the implementation of the program)	63%	5	25%	2	12%	1	8
8	Not currently disabled individuals	50%	4	12%	1	38%	3	8
9	Unhoused individuals	50%	4	0%	0	50%	4	8
10	Undocumented individuals	50%	4	12%	1	38%	3	8
11	Other	100%	1	0%	0	0%	0	2

Other - Text

California Resident and only use in CA [Yes – Eligible]

Out of State for Five Years [Eligibility not specified]

QUESTION 3A (1 OF 2)

For each group you selected should not be eligible, indicate why and if there any exceptions

Juveniles (i.e., individuals under the age of 18) - Please explain why

view LTSS for adults

Should be available to all adults which is legally 18

I believe most juveniles in need of long-term care services would be covered by regional center services or Medi-Cal.

Potentially covered by existing programs. If payroll tax is considered, would not have contributed to program.

Program should be focused on the elderly. The support for younger than 18 should fall on other programs

Non-elderly adults (i.e., individuals aged 18 through 64) - Please explain why

Potentially covered by existing programs.

Program should be focused on the elderly over 65 who need assistance at home or other location with activities of daily living

Currently disabled individuals (i.e., those disabled prior to the implementation of the program) - Please explain why

Program should have a specific starting point of eligibility.

Present programs support these individuals but may qualify when they are over 65

QUESTION 3A (2 OF 2)

For each group you selected should not be eligible, indicate why and if there any exceptions

Not currently disabled individuals - Please explain why

If they need it?

Undocumented individuals - Please explain why

If they have not contributed and vested they should not be able to participate but if they have vested they should be able to use benefit

QUESTION 3B I (1 OF 3)

For each group you selected <u>should</u> be eligible, are there any exceptions within each group that you feel should not be eligible, and if so, why?

Elderly (i.e., individuals aged 65 and older) - Please specify any exceptions

Coordination of benefits with other programs. Difference / tiering in benefits and services depending on employment and income history.

They should be vested but there could be some exception made if the spouse did not use benefit the other partner could use benefit

None

not otherwise covered by another source

Non-elderly adults (i.e., individuals aged 18 through 64) - Please specify any exceptions

If they have coverage offered thru their employer

None

not otherwise covered by another source

Employed individuals (part-time) - Please specify any exceptions

Coordination of benefits with other programs. Difference / tiering in benefits and services depending on employment and income history.

If a partner met the vesting schedule and partner did not use the individual should be able to use benefit

If they have coverage offered thru their employer

None

not otherwise covered by another source

QUESTION 3B I (2 OF 3)

For each group you selected <u>should</u> be eligible, are there any exceptions within each group that you feel should not be eligible, and if so, why?

Employed individuals (full-time) - Please specify any exceptions

Coordination of benefits with other programs. Difference / tiering in benefits and services depending on employment and income history.

if they are full time employed they may need to get a limited benefit or all depending on income

If they have coverage offered thru their employer

None

not otherwise covered by another source

Unemployed individuals - Please specify any exceptions

Coordination of benefits with other programs. Difference / tiering in benefits and services depending on employment and income history.

if they are unemployed and have met vesting schedule or they may have a partner that did vest but did not use benefit they should be able to participate

Currently disabled individuals (i.e., those disabled prior to the implementation of the program) - Please specify any exceptions

not otherwise covered by another source of support

None

QUESTION 3B I (3 OF 3)

For each group you selected <u>should</u> be eligible, are there any exceptions within each group that you feel should not be eligible, and if so, why?

Not currently disabled individuals - Please specify any exceptions

Coordination of benefits with other programs. Difference / tiering in benefits and services depending on employment and income history.

not otherwise covered by another source of support

None

Unhoused individuals - Please specify any exceptions

None

Undocumented individuals - Please specify any exceptions

Should have some qualifications such as other countries do for immigrants

None

QUESTION 3B II (1 OF 3)

For each group you selected should be eligible, when should each group be eligible to receive LTSS benefits?

		Immedi	ately	After a sp eligibility		After a speci spend-dow		Oth	er	Total
#	Question	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	Count	Count
1	Juveniles (i.e., individuals under the age of 18)	67%	2	33%	1	0%	0	0%	0	3
2	Elderly (i.e., individuals aged 65 and older)	38%	3	62%	5	0%	0	0%	0	8
3	Non-elderly adults (i.e., individuals aged 18 through 64)	40%	2	60%	3	0%	0	0%	0	5
4	Employed individuals (part-time)	29%	2	71%	5	0%	0	0%	0	7
5	Employed individuals (full-time)	29%	2	57%	4	14%	1	0%	0	7
6	Unemployed individuals	33%	2	67%	4	0%	0	0%	0	6
7	Currently disabled individuals (i.e., those disabled prior to the implementation of the program)	60%	3	20%	1	0%	0	20%	1	5
8	Not currently disabled individuals	25%	1	50%	2	0%	0	25%	1	4
9	Unhoused individuals	100%	4	0%	0	0%	0	0%	0	4
10	Undocumented individuals	75%	3	25%	1	0%	0	0%	0	4
11	Other	0%	0	0%	0	0%	0	0%	0	0

QUESTION 3B II (2 OF 3)

For each group you selected should be eligible, when should each group be eligible to receive LTSS benefits? Please explain your selection.

Elderly (i.e., individuals aged 65 and older) - Please explain your selection

screened process

This population is in need now and currently often times have to spend down and we should be eliminating that as an option all together

I think the approach should consider the income of individuals with different design and cost depending on income level.

There should be a period of pre-funding for the program before benefit begin.

If someone has vested and contributed they should be able to use the benefit when needed

Non-elderly adults (i.e., individuals aged 18 through 64) - Please explain your selection

screened process

This population should not have to wait for something to happen before they are eligible

Employed individuals (part-time) - Please explain your selection

screened process

If you are employed and pay into it you should get the benefit right away

There should be a period of pre-funding for the program before benefit begin.

QUESTION 3B II (3 OF 3)

For each group you selected should be eligible, when should each group be eligible to receive LTSS benefits? Please explain your selection.

Employed individuals (full-time) - Please explain your selection

screened process

Should not matter if you work part or full time to access necessary support and services

There should be a period of pre-funding for the program before benefit begin.

Unemployed individuals - Please explain your selection

screened process

There should be a period of pre-funding for the program before benefit begin.

Currently disabled individuals (i.e., those disabled prior to the implementation of the program) - Please explain your selection

screened process

Not currently disabled individuals - Please explain your selection

screened process

There should be a period of pre-funding for the program before benefit begin.

QUESTION 3B III (1 OF 3)

For each group you selected should be eligible, who should finance each group's LTSS costs?

		(A)Finance government impact Californ higher t	(which will ians through	(B)Explicitly so other groups (p the subsidizing rightmost	please specify group in the	(C)Explicitly for their group (red several of the include member of their c	cognizing that groups may bers that do ans to finance	(D)Other (ple using the righ box	ntmost text	Total
#	Question	Percentage	Count	Percentage	Count	Percentage	Count	Percentage	Count	Count
1	Juveniles (i.e., individuals under the age of 18)	100%	3	0%	0	0%	0	0%	0	3
2	Elderly (i.e., individuals aged 65 and older)	50%	4	0%	0	13%	1	37%	3	8
3	Non-elderly adults (i.e., individuals aged 18 through 64)	50%	3	0%	0	17%	1	33%	2	6
4	Employed individuals (part-time)	26%	2	12%	1	12%	1	50%	4	8
5	Employed individuals (full-time)	26%	2	12%	1	12%	1	50%	4	8
6	Unemployed individuals	33%	2	17%	1	0%	0	50%	3	6
7	Currently disabled individuals (i.e., those disabled prior to the implementation of the program)	80%	4	20%	1	0%	0	0%	0	5
8	Not currently disabled individuals	50%	2	0%	0	0%	0	50%	2	4
9	Unhoused individuals	75%	3	25%	1	0%	0	0%	0	4
10	Undocumented individuals	75%	3	25%	1	0%	0	0%	0	4
11	Other	0%	0	0%	0	0%	0	0%	0	0

QUESTION 3B III (2 OF 3)

For each group you selected should be eligible, who should finance each group's LTSS costs? If you selected (B) or (D) please use this space to elaborate on your answer.

Elderly (i.e., individuals aged 65 and older) - If you selected (B) or (D) please use this space to elaborate on your answer.

Hybrid financing between A & B

There should be a balance of government financing, personal responsibility and private options (such as LTCI), as well as coordination with other programs per AB-567.

combination of payroll tax, general fund tax and employer contribution

Non-elderly adults (i.e., individuals aged 18 through 64) - If you selected (B) or (D) please use this space to elaborate on your answer.

combination of government and private sources (a "tax" on health plans)

Hybrid financing between A & B

Employed individuals (part-time) - If you selected (B) or (D) please use this space to elaborate on your answer.

A combination

Hybrid financing between A & B

There should be a balance of government financing, personal responsibility and private options (such as LTCI), as well as coordination with other programs per AB-567.

Employed individuals (full-time) - If you selected (B) or (D) please use this space to elaborate on your answer.

A combination

Hybrid financing between A & B

There should be a balance of government financing, personal responsibility and private options (such as LTCI), as well as coordination with other programs per AB-567.

QUESTION 3B III (3 OF 3)

For each group you selected should be eligible, who should finance each group's LTSS costs? If you selected (B) or (D) please use this space to elaborate on your answer.

Unemployed individuals - If you selected (B) or (D) please use this space to elaborate on your answer.

not sure

There should be a balance of government financing, personal responsibility and private options (such as LTCI), as well as coordination with other programs per AB-567.

Not currently disabled individuals - If you selected (B) or (D) please use this space to elaborate on your answer.

There should be a balance of government financing, personal responsibility and private options (such as LTCI), as well as coordination with other programs per AB-567.

What do you view as the appropriate/ideal role for private insurance (e.g., LTC insurance, Medicare Advantage, other) with regard to aging and long-term care needs?

#	Response
1	range of additional service options to choose from that is realistically affordable
2	Not sure the ideal role but do feel private should still be utilized in some instances because it's what's best for the consumer.
3	Ideal role for provide insurance is to cover individuals in need and promote integration of services across care continuum.
4	Per AB-567, the establishment of a joint public and private system is an important consideration, especially relative to accessibility, coordination and integration of benefits, providing supplemental coverage, reducing the pressure on MediCal and Medicaid budgets.
5	I'd like to see a study of how the costs would compare if LTSS was part of a single payer healthcare system vs a separate benefit. I'd like to know if there is a viable private LTC insurance product for more than the very wealthy, but we haven't seen it yet.
6	They would work in partnership with the benefits an LTSS program would provide and could be in addition to the benefits these programs provide. All working together to give best support possible for the elderly
7	I think they should be options NOT mandated ie for seniors they should have the right to choose
8	For people who can afford private insurance, it should be the primary source of LTC insurance. But it should be made more accessible.

In what areas do you feel that the private LTC insurance industry and/or governments (state and federal) have been successful in providing for aging and long-term care needs?

Response

- The Federal and state governments have been somewhat successful in financing long-term care services through Medi-Cal. However, there are still limitations because
 Medi-Cal requires individuals to spend down their assets and has low reimbursement rates for providers. I don't think the private LTC insurance industry has been successful because limited and expensive products.
- 2 Grass roots (local) passion, paying eligible claims, care coordination services
- 3 Private insurance has not. I like the WA State Model and I'm proud of the IHSS program, which could be expanded to all.
- It has provided a safety net for those that enrolled in LTC and given them an option in the type of support they would be provided. State programs that have been available focus on those who cannot financially afford LTC. These programs have provided some good support that would have otherwise not been available.
- 5 In some managed care programs and juvenile programs to some extent
- Washington's program seems to be working fairly well. Medicaid works well except that it requires nursing home level care, a huge waste of money. Should apply to lower levels of care.
- The topic and need is coming to head, given the increasing numbers of people who are living longer and thus needing LTSS. Not sure that there's been "successes" at this point... still early...
- Allowing for consumer choice is vital. Allowing them to pick providers, and services that best suit their needs is important. Government has been successful, this year in particular, providing adequate funding to things like training providers so they can give the best care possible. In addition, Creating the master plan for aging recommendations pointed out the growing need for LTC insurance as the elderly population grows and identified hurdles that must be overcome to truly give the best services and supports

In what areas do you feel that the private LTC insurance industry and/or governments (state and federal) have been unsuccessful in providing for aging and long-term care needs?

Response

Private LTC insurance has been unsuccessful because it isn't affordable for those who need it the most. Products are expensive and limited. For government, there is a lack of understanding that Medicare doesn't cover long-term care. In addition, there is still an institutional bias in financing for long-term care services and lack of integrated financing to provide incentives to cover the most cost-effective care options.

- 2 Education, market penetration (access)
- Outside of Medicaid LTSS (IHSS), and some
 Adult Day programs there isn't much available for the middle class.
- 4 LTC tends to be expensive and only used by those who planned and had the financial means. Not having affordable access to more individuals has made it difficult for all.
- 5 In most areas there have been mixed success many discovering the cost of care is extremely high
- 6 requiring that people spend down so low to qualify for LTC under Medicaid is a little bit cruel.
- 7 each state is left to do whatever it sees fit (or not), and thus less opportunities for leveraging of resources; no coordinated effort to address this issue
- 8 They have relied too heavily on Medicare dollars that don't adequately cover LTSS and not focused enough on the true needs of the consumer and providers

QUESTION 7 (1 OF 2)

What do you see as the primary hurdle(s) for the success of a state-wide insurance program for LTSS, and what are some potential mitigation steps?

Hurdle	Mitigation steps
How to structure the program	learning from others and drafting processes/structure to test (have something for people to provide feedback on)
Making it affordable	
Financing	Mandatory enrollment
timeline to implement	Planning relative to directives
Financing	
who is elegible	Focus on the 65 plus elderly maybe even a bit older.
Taxation	Step up programs and income based assistance
Costs	Payroll taxes, allow for lower levels of care (besides SNF)
LTSS Workforce	Create incentives, training programs to encourage individuals to work in LTSS.
Financing	consideration of all sources, including potential future saving to state budgets. Independent actuarial reviews.
Leadership	

QUESTION 7 (2 OF 2)

What do you see as the primary hurdle(s) for the success of a state-wide insurance program for LTSS, and what are some potential mitigation steps?

Hurdle	Mitigation steps
lack of interest by the public	make it mandatory
political will	education, grass roots campaigns
Workforce	
cost and benefit amount	Need to make it affordable from a payroll tax perspective and have a defined benefit amount that participants know they will receive
Will to provide this level of health care across the state.	Start slow use excellent examples of success
potential for abuse	not sure how to get around this without creating equity issue
vesting requirements	benefits are based on amount of time someone contributes like social security as an example
Quality of care	Strict quality indicators that must be met for insurers and providers
Making it access able without spending down	Find a dedicated funding stream
How program will be funded	Identify where possible existing overlaps might exist, and/or how to further delineate the benefits/coverage; build support from stakeholders
Understanding LTSS needs	Education, building awareness

Select the LTSS financing initiatives being pursued in other states and/or the federal level that you are aware of.

#	Answer	Percentage	Count
1	Hawaii (Kūpuna Caregivers Program)	75%	6
2	Maine (Universal Home Care Trust Fund)	25%	2
3	Minnesota (Own Your Future)	25%	2
4	Washington (WA Cares Fund)	88%	7
5	President Biden's \$400 Billion LTC proposal as a part of the American Jobs Plan	100%	8
6	Senator Thomas Suozzi's proposed Well-Being Insurance for Seniors to be at Home (WISH) Act	50%	4
7	Other (please specify in text box below)	13%	1

Other (please specify in text box below) - Text

CLASS Act, CHRONIC Act

QUESTION 8A (1 OF 6)

What do you like/dislike about each initiative that you are aware of?

Hawaii (Kūpuna Caregivers Program) - Likes about this initiative eases financial burden for family caregivers Provides financial assistance to caregivers and allows them to also continue to work outside the home addresses working family care givers Money in hands of clients No income or assest limits, fixed weekly amount, family caregiver can be a family Seems to work well in a small state

Hawaii (Kūpuna Caregivers Program) - Dislikes about this initiative

only available for employed residents; not sure that \$350/week cap is enough financial support

small benefit, inconsistent funding since tied to political considerations

starts at 60, cannot live in assisted living or care home or skilled nursing

Unsure of cost

QUESTION 8A (2 OF 6)

What do you like/dislike about each initiative that you are aware of?

Maine (Universal Home Care Trust Fund) - Likes about this initiative

home care benefit

trust fund, helps all seniors, 65 and older

Maine (Universal Home Care Trust Fund) - Dislikes about this initiative

lack of buy in

18-64 age group, taxes a specific group to pay and not every one contributes,

QUESTION 8A (3 OF 6)

What do you like/dislike about each initiative that you are aware of?

Minnesota (Own Your Future) - Likes about this initiative

coordination with other government benefits

At least addressing the need of elderly

Minnesota (Own Your Future) - Dislikes about this initiative

complex

just information campaign

QUESTION 8A (4 OF 6)

What do you like/dislike about each initiative that you are aware of?

Washington (WA Cares Fund) - Likes about this initiative

available for workers to pay into and access

Everyone contributes and there is a dedicated fund to assist up to a specified dollar amount.

buy in

Strong Workforce Componet

over age 65, helps in addition to whatever assests you have, Fixed dollar amount of benefits, use at home or a facility like assisted living, you have to contribute to be elegible

Not sure

seems to work

Washington (WA Cares Fund) - Dislikes about this initiative

lifetime benefit of \$36,500 may not be enough;

Employers don't contribute and that should perhaps be discussed

small benefit, opt out provisions

Limited to \$33,000

Mandates

opt-out for high income

QUESTION 8A (5 OF 6)

What do you like/dislike about each initiative that you are aware of?

President Biden's \$400 Billion LTC proposal as a part of the American Jobs Plan - Likes about this initiative

strengths long-term care system with home and community-based services to help people who need significant assistance to continue to "age in place," living at home versus in LTC facilities or group homes.; potential of workforce development piece in fudning

Brings specific funding to LTSS

Recognition of need to finance community-based LTC

workforce support

Focus on HCBS

expands LTC under Medicaid, for 65 plus disabled, home care and facilties could be included

A good start

President Biden's \$400 Billion LTC proposal as a part of the American Jobs Plan - Dislikes about this initiative

still early, and no specification of how how additional funding will be spent; question of whether will be equitable towardmiddle-income families

Not sure

too open ended, Medicaid only

Let's get real about wages

high cost and focused more on workers than 65 plus year olds

Excludes some provider types such as private duty nursing and home care services

QUESTION 8A (6 OF 6)

What do you like/dislike about each initiative that you are aware of?

Senator Thomas Suozzi's proposed Well-Being Insurance for Seniors to be at Home (WISH) Act - Likes about this initiative

potential for coordination with state and private programs during the waiting period, public education campaign, investment in equity

Trust fund for LTC, private and gov, all contribute that work,

Senator Thomas Suozzi's proposed Well-Being Insurance for Seniors to be at Home (WISH) Act - Dislikes about this initiative

feasibility TBD

seems like a good program not much not to like

Leaves out some groups from being able to participate in teh program

What process(es) do you recommend be established to proactively address anticipated opposition to California's program design and financing?

#	Response
1	Determining all stakeholders impacted, and engaging them to align on same fundamental components; need for state-wide education and awareness efforts.
2	Stakeholder and community feedback as well as information accessible to the public
3	Mandatory enrollment into LTC plan for broad population. For individuals at lower income levels, consider expanding Medi-Cal eligibility. Education campaign regarding Medicare doesn't cover long-term care and risk of catastrophic cost.
4	Transparency along the way, meaningful public engagement, education, addressing consideration in AB-567 and charter
5	Strong buy-in and leadership from elected officials on all levels
6	Need to focus on the fact its to help the elderly who are the most vulnerable. Obligation to care for those elderly who can no longer care for themselves.
7	Start the public education early there will be those that say too much cost too much tax and too many to care for but we need to look to others who have had clinical and social success such as tribal care (Oregon) France's health care system for all are good places to start and look for quality measures and societal beneifts
8	let the public (and legislators) hear stories from people who have had bad experiences due to lack of LTC insurance

OliverWyman