

California Long Term Care Insurance (LTCI) Task Force Meeting #1 Minutes Tuesday, March 9, 2021

1. Task Force Meeting Call to Order – 1:03 PM

- Roll Call present: Dr. Lucy Andrews, Grace Cheng Braun, Anastasia Dodson, Michael Mejia,
 Doug Moore, Dr. Karl Steinberg, Kim McCoy Wade, Tiffany Whiten
- Quorum was met.

2. Agenda Item #1: Welcome & Introductions

- Chair Susan Bernard introduced Insurance Commissioner Ricardo Lara who welcomed the Task Force.
- Susan went over housekeeping items.
- o Introductions were made by each Task Force member and from each California Department of Insurance (CDI) staff member present.
- Public comments were taken:
 - Jane Washburn introduced herself and stated she is very excited for this, but want to make sure people like me are heard – people who are on claim and need assistance to live at home are not often included in the discussions that affect us.
 - Donna Benton introduced herself and stated she is so happy we are dealing with this issue as it is very important.

3. Agenda Item #2: Bagley-Keene Open Meeting Act Overview

o An overview of the Act was provided by Appointments Officer Amanda Bastidas.

4. Agenda Item #3: Values & Goals

- Susan explained that the purpose of the Charter is to get us all on the same page about what
 we are doing and what our roles are and asked for comments or a motion to approve.
- o Dr. Karl Steinberg moved to adopt the Charter and Doug Moore seconded.

5. Agenda Item #4: Overview of tasks/timeline

- Discussion and thoughts of the work breakdown and considerations document
 - There was a lot of positive feedback on this document and appreciation for it as a visual aid, breaking down the work into manageable pieces.
 - "Workforce" will probably need many more little boxes because it is so critical component. Whether through paid or unpaid (family caregiving). Need to build out the workforce, the diversity of it, and the wages.
 - We need to be more creative when we talk about financing and look for other possible buckets.

- We should have our equity commitment more visible, it's more than being "culturally responsive". Let's pay a little more attention to highlighting that and meeting California's diverse needs. Kim McCoy Wade is happy to help with those edits.
- Public comment:
 - Add a box for "community liaison"
 - The first three columns need substantial input from actuarial experts and the last four columns need significant definition before the first three columns can properly be addressed, especially column two.
 - Where would the rights of the disabled insured fit into this chart?
 - The Task Force agreed to place it under "Access".
 - How will you be building off the studies done by DHCS?
 - The Task Force agreed to leverage off of it to the extent possible.
 - Persons with disabilities are not represented on this Task Force. Disabled people need care their whole lives.
 - The current vacancies under the Governor's Office were mentioned.
 Other members expressed their connection to the disabled community.
 - "Program integrity" should be under "Administrative Considerations" including "benefit appeal".
 - "Family caregiver assessment" should be part of "Access".
 - There should be a separate column for "Evaluation of the Program", making sure it's meeting the needs and reaching the target populations.
 - Response: Once things get going there will be regular, ongoing considerations (apart from this work breakdown) that we will need to be doing. It may go across areas, so maybe across all columns ("Evaluation and Efficacy").
 - Will the focus be on LTC insurance or the public benefit or both?
 - o Response: Yes, both.
 - In terms of building on the Milliman actuarial study, it would be good to ensure focus on the groups (non-workforce) that were not considered in the report, as well as race/gender impacts on poverty/income/wealth.
 - Under "Services" category, it was suggested to add a box for exploring other residential models, i.e. group home up to 8-10 residents with caregivers with onsite nurse.
 - Task Force agreed to add a box for "Other models/living situations".
 - It was recommended that Washington state be brought into discuss their
 program and where they are on the role of LTCI coming in potentially as a
 supplement to the program, and also explore their use of waivers as a source of
 financing.
 - Coordinate with Medicare policy; so much needs to be changed about LTC in Medicare.
 - DME (Durable Medical Equipment) is critical to LTC. There are frequently pieces of equipment that are critical but are not covered by Medicare.
 - Response: Add a sub-box under "Coordination/Interaction" to remember to look at and address as needed.
 - The box "share of cost" under financing is a key element. It is important to know the financial constraints of the variety of Californians in both their financing of

their plans and the cost of caregiving. What is catastrophic for the variety of Californians?

- o Brief Zoom disconnection occurred. With the meeting reconnected, the roll was once again taken (same members were present) and quorum established.
 - Medicare may need its own box under "Coordination"
 - "Training" should be flushed out in addition to "Certification". Flesh out the workforce with other providers.
 - There was a lot of positive feedback from members on this document overall.
 - Susan Bernard asked that everyone please spend some time thinking about this and we will add to it as we go.

6. **Agenda Item #5**: Discuss survey responses

- This survey was sent out to the Task Force members prior to the meeting to gauge interest in topics for future meeting presentation topics. Susan Bernard asked Task Force members for their top three topics they would like to see covered at the next meeting.
- Topics mentioned: Financing, systems delivery, and workforce, Washington program and their lessons learned (what is not working well) as well as their quality of jobs/wages, social insurance experts.
- Many Task Force members agreed that demographics on the current and projected population in need was most important to cover first.
- Public comments:
 - Understand the failures of the private market, Partnership and CalPERS closures of applications. Understand the spend-down population and how to handle people in Medi-Cal with share of cost.
 - Anastasia Dodson offered to do a presentation on the Partnership program as a related issue
 - Information on the role of family caregivers in providing much of our LTSS care (per AARP, the economic value of unpaid care is more than what California spends on Medi-Cal), needs of this population, and allowing family caregivers to be the ones providing care.
 - An article by Steve Forman, an LTC broker in the Washington area, was shared.
- We need to avoid false solutions like the idea that people can actually afford traditional LTC insurance policies. Let's be innovative.
- Are there other states doing similar endeavors besides Washington? Milliman is working with Illinois and Michigan, similar to what they did for California. Hawaii and Minnesota have done work in this area. If we really want to think outside the box, maybe we look at the way other countries have universal health insurance.
- The Task Force decided to start with three presentations at the next meeting. The topics will be: demographics, the Washington program, and the current state of the long-term care insurance market.
 - 30-minutes each (20 minute presentation with 10 minute question and answer) with a short break after the second. We will ask presenters for their slides ahead of time to share with the Task Force.
- Public comment:
 - There was an offer to share an article and presentation from the California Summit about state initiatives on LTSS financing which included six or seven states. There was another offer to share a brief published by the American Academy of Actuaries that

outlines seven essential criteria for LTC programs.

7. Agenda Item #6: Next Steps

- Next meeting date will likely be in early June. CDI will send around another survey monkey.
 Hopefully we will have more Task Force members in place by then.
- o Zoom Chat comments will be shared with all of the Task Force members.

8. Agenda Item #7: Closing

 At 2:41 PM, Susan Bernard asked for a motion to adjourn. Motion to adjourn taken from Doug Moore and Dr. Karl Steinberg seconded.