

May 1, 2024 LTSS Trust Commission Meeting Minutes

Meeting Date	5/1/2024	Time	1:00 – 4:00 pm
Attendees			
<input checked="" type="checkbox"/> Representative Paul Harris	<input type="checkbox"/> Representative Bryan Sandlin	<input checked="" type="checkbox"/> Representative Frank Chopp	<input checked="" type="checkbox"/> Representative Nicole Macri
<input checked="" type="checkbox"/> Senator Curtis King	<input type="checkbox"/> Senator Judy Warrick	<input checked="" type="checkbox"/> Senator Karen Keiser	<input checked="" type="checkbox"/> Senator Steve Conway
<input checked="" type="checkbox"/> Secretary Jilma Meneses, Department of Social and Health Services	<input checked="" type="checkbox"/> Cami Feek, Employment Security Department (delegate Daniel Zeitlin)	<input checked="" type="checkbox"/> Taylor Linke, Health Care Authority	<input checked="" type="checkbox"/> Peter Nazzal, Home Care Association Representative
<input checked="" type="checkbox"/> Madeleine Foutch, Representative of a union representing LTC workers	<input checked="" type="checkbox"/> Cathleen MacCaul, Representative of an organization representing retired persons	<input checked="" type="checkbox"/> Lauri St. Ours, Representative of an association representing SNF/ALF providers	<input checked="" type="checkbox"/> John Ficker, Adult Family Homes Providers Representative
<input checked="" type="checkbox"/> Ruth Egger, Individual Receiving LTSS #2 (or designee or representative of consumers receiving LTSS)	<input checked="" type="checkbox"/> Laura Cepoi, Organization Representing the Agencies on Aging	<input checked="" type="checkbox"/> Mark Stensager, Individual Receiving LTSS #1 (or designee or representative of consumers receiving LTSS)	<input type="checkbox"/> Rachel Smith, Representative of an organization of employers whose members collect the premium (or will likely be collecting)
Guest Speakers			
<input checked="" type="checkbox"/> Ben Veghte, Department of Social and Health Services	<input checked="" type="checkbox"/> Andrea Meewes Sanchez, Department of Social and Health Services	<input checked="" type="checkbox"/> Kristen Maki, Department of Social and Health Services	<input checked="" type="checkbox"/> April Amundson, Employment Security Department
<input checked="" type="checkbox"/> Jose Hernandez, Employment Security Department	<input checked="" type="checkbox"/> Steve Zawoysky, Employment Security Department	<input checked="" type="checkbox"/> Matt Smith, Office of State Actuary	<input checked="" type="checkbox"/> Porsche Everson, Facilitator

Topic	Minutes
Welcome and Call to Order	<ul style="list-style-type: none"> Commission members in attendance indicated above. Secretary Meneses reviewed the meeting goals.
Consent Agenda	<ul style="list-style-type: none"> Cathleen MacCaul made a motion to amend the agenda to take action on the Minimum Provider Qualifications Workgroup agenda item. Laura Cepoi seconded the motion. A vote was taken and 6 voted aye, 0 voted nay. The motion did not pass. <ul style="list-style-type: none"> Meneses: 15 voting members present, so in order to change the agenda, there would have to be 9 in favor. King: Asks to retake the vote because they were not aware that it took 60% of the votes to pass the motion. A revote was taken and 7 voted aye, 0 voted nay. The motion did not pass. <ul style="list-style-type: none"> Meneses: We invite the Commissioner to speak during the agenda item, but no action will be taken. No additional objections were made, items were adopted.
WA Cares Fund Program Refresh	<p>Key program details per current statute (RCW 50B.04):</p> <ul style="list-style-type: none"> Premium rate - \$0.58 cents for every \$100 earned Lifetime benefit maximum –\$36,500, adjusted annually up to inflation, paid directly to providers Three pathways to qualified individual status <ul style="list-style-type: none"> Contribute 10 years without interruption of five or more consecutive years



	<ul style="list-style-type: none"> ○ Contribute 3 of the last 6 years from the date of application for benefits ○ For near-retirees (born before 1968): contribute at least one year, earning one-tenth of the lifetime benefit amount for each year contributed ○ A person must work 500 hours during a year to receive credit for a qualifying year ● Eligible beneficiary <ul style="list-style-type: none"> ○ A qualified individual who requires assistance with at least 3 activities of daily living (i.e., bathing, eating, ambulation, medication management, toilet use, transfer, etc.) ○ You can take your benefit with you if you leave the state
Program Update	<p><u>Communications and Outreach Update</u></p> <p>TV, radio & digital outreach</p> <ul style="list-style-type: none"> ● Fall 2023 <ul style="list-style-type: none"> ○ Goal: Encourage long-term care planning among near-retirees ○ Audience: Ages 50+ in Spokane and Yakima counties ○ Channels: Broadcast and cable TV, radio ○ Results: <ul style="list-style-type: none"> ▪ More than 18,000 TV spots and 10,000 radio spots ▪ More than 55 million total impressions ● Feb-March 2024 <ul style="list-style-type: none"> ○ Goal: Use care stories to illustrate the need for long-term care ○ Audience: Ages 30+ in King, Snohomish, Pierce, Thurston and Clark counties ○ Channels: Digital video/audio, social media, cable TV ○ Results: <ul style="list-style-type: none"> ▪ More than 20,000 clicks ▪ Nearly 38 million total impressions ● Summer/Fall 2024 <ul style="list-style-type: none"> ○ Goals: Use care story and FAQ videos to illustrate the need for long-term care, highlight portability change ○ Audience: Ages 35+ in King, Snohomish, Pierce, Thurston, Clark and Spokane counties ○ Channels: Broadcast and cable TV, digital video, banner graphics, social media <p>Public webinars</p> <ul style="list-style-type: none"> ● WA Cares Basics <ul style="list-style-type: none"> ○ Quarterly webinars with DSHS and ESD presenters covering the need for long-term care, details of how the program works, audience Q&A <ul style="list-style-type: none"> ▪ September 2023 for workers (in Spanish) ▪ November 2023 for self-employed workers ▪ January 2024 for workers ▪ April 2024 for workers ▪ July 2024 for employers ● WA Cares Conversations <ul style="list-style-type: none"> ○ Monthly webinars with a panel of experts covering a topic related to long-term care, brief overview of how the program works, audience Q&A <ul style="list-style-type: none"> ▪ October 2023: Long-Term Care Planning

- November 2023: Talking With Loved Ones About Long-Term Care
- February 2024: Caregiving in Rural Communities
- March 2024: Supporting Workers with Disabilities
- May 2024: Caring for Stroke Survivors
- June 2024: Caregiving and Brain Health

Social media

- Activities
 - Organic social media on Facebook, Instagram, LinkedIn, YouTube
 - Cross-posting to DSHS social media
 - Responding to comments and questions
 - Boosting posts and working with partners to drive additional reach

Newsletter & email updates

- Activities
 - Publicly available mailing list
 - More than 14,800 subscribers
 - Monthly newsletter & additional notifications of events & resources
 - User-selected topics like rulemaking

Website

- Activities
 - Monthly news articles
 - Regularly updated content
- Key Metrics
 - 35,000 monthly users on average
 - More than 268,000 pageviews over the past 90 days

Partner outreach

- AAA Outreach
 - Working with Area Agencies on Aging throughout the state to integrate information on WA Cares into their existing outreach and identify new opportunities for WA Cares-specific outreach
 - Each AAA has developed a customized outreach plan based on their region and their organization's specialties
 - Builds on trust and partnerships already held by AAAs locally
- Partner Roundtables
 - Continuing to regularly convene partner roundtable meetings with business and community organizations throughout the state
 - Opportunity for sharing information, answering questions and gathering feedback
 - Held **9 roundtable meetings** in August/October last year with total of **132 participants**
 - Held **8 roundtable** meetings in April
 - More planned this summer and fall

Open for questions:

- King: Can you tell me how much we're spending on each of the 3 times frames on TV, radio, and digital outreach?
 - Maki: We will have to follow up after the meeting. **ACTION ITEM**

- Foutch: I noticed that one of the webinars had significantly more participants. I'm wondering if you know what drew those attendees in January and if that can be replicated?
 - Maki: There were actually 2 webinars combined (Dec/Jan). One was a WA Cares Basics webinar which tend to have a larger audience, and the other was a Conversations Webinar.
- Egger: How are you advertising the public webinars?
 - Maki: We're using all the channels that we own, so our newsletters, DSHS and WA Cares social media, and the website. For the Conversations Webinars we use all the partner organizations on the panel to get the message to their audiences as well.
 - Egger: If you want to send it to the Commissioners as well, some of us have connections and can advertise it for you.

Medicaid & Medicare Savings Waiver

- Because of WA Cares, more people will avoid or delay spending down their assets and qualifying for Medicaid to pay for long-term care
- RCW 50B.04 directs DSHS to apply for a demonstration waiver from CMS to allow for the state to share in the savings generated in the federal match for Medicaid long-term services and supports and Medicare due to the operation of the program
- DSHS & HCA submitted a concept paper to CMS and discussions have begun focused on Medicaid savings through an 1115 Waiver
- Aiming to have a negotiated agreement with CMS by the summer of 2025.

Open for questions:

- Keiser: You mentioned you're currently in discussions with CMS on recovering savings from the avoidance of spend down on Medicaid. Do you have any estimate what the possible annual savings might be?
 - Meewes Sanchez: Not at this point. We are looking to update the actuarial analysis that Milliman did prior to a lot of the program changes. We're hoping to have those estimates by this summer, and we'll share them then. **ACTION ITEM**

DSHS Rulemaking Update

- DSHS filed notices to the public (CR-101) about rulemaking regarding the following areas:
 - General Provisions and Approved Services
 - Assessment and Service Delivery Process
 - Intake and Application Process
 - Provider Registration
- DSHS is conducting listening sessions which are open for the public to join
 - Information can be found on the [WA Cares Fund website](#).
- DSHS expects to file at least one CR-102 by late 2024.

ESD Rulemaking Update

- ESD filed notices to the public (CR-101) about rulemaking regarding the following areas:
 - Implementing ESD's responsibilities for Portability (SHB 2467)
 - Qualified Individual Status
 - Verification of Information (for example wages or self-employment income)
 - Public Records Requests

	<ul style="list-style-type: none"> • Working with cross agency partners for feedback. • ESD anticipates rules to be final by the end of 2024. ESD will be hosting any stakeholder meetings and hearings associated with this rulemaking effort. <ul style="list-style-type: none"> ◦ Information can be found on the WA Cares Fund website. • ESD has also filed a notice (CR-102) to address “cross-program payment allocation.” <ul style="list-style-type: none"> ◦ Information can be found on the ESD Rulemaking website.
Finance Update	<p><u>Finance Update: Monitoring Early Experience</u></p> <ul style="list-style-type: none"> • As part of the Risk Management Framework (RMF), Phase 1 is largely focused on data collection, monitoring, and updating actuarial projections • Actual experience will be used in future actuarial projections • When comparing actual to assumed data, sustained deviations or significant short-term deviations could have long-term impacts <ul style="list-style-type: none"> ◦ Depending on the source of the deviation, it could take years before there is sufficient credible experience to modify assumptions based on actual experience ◦ This is consistent with Phase 1 of the RMF • In the meantime, OSA and Milliman will be monitoring emerging experience and reporting on any impacts to long-term fund solvency <p><u>Quarterly Reporting and Covered Worker Update</u></p> <ul style="list-style-type: none"> • 2023 Q4 quarterly reporting (as of 04/12) <ul style="list-style-type: none"> ◦ 212,162 employers; ~3.5 million distinct workers ◦ \$80.1 billion gross wages reported ◦ \$59.7 billion premium wages reported ◦ \$346.2 million premiums assessed • Approved exemptions <ul style="list-style-type: none"> ◦ 2023 Q4: 534,088 ◦ 2024 Q1: 537,783 <ul style="list-style-type: none"> ▪ 481,901 private insurance ▪ 32,601 non-immigrant visa ▪ 18,246 out-of-state ▪ 3,689 veteran disability ▪ 1,346 active-duty partner • Self-employed opt ins (total effective in quarter) <ul style="list-style-type: none"> ◦ 2023 Q4: 385 ◦ 2024 Q1: 620 <p><u>Quarterly Finance Update</u></p> <ul style="list-style-type: none"> • Premium Remittance 1/1/2024 - 3/31/2024 of \$343.2 million includes: <ul style="list-style-type: none"> ◦ \$304.3 million in ACH electronic payments (89%) ◦ \$30.6 million in checks sent to US Bank Lockbox (9%) ◦ \$7.9 million in Inter-Agency Payments (2%) ◦ \$247 thousand in checks sent directly to ESD (<1%)

	<ul style="list-style-type: none"> ○ \$225 thousand in credit card payments (<1%) ● Account transfers and retention since 1/5/2024 <ul style="list-style-type: none"> ○ \$355.3 million transferred to State Investment Board ○ \$19.7 million retained for unexpended FY24 budget appropriations ● WA Cares Fund Balance on 4/8/2024: \$ 26,004,062
Legislative Session Update	<p>SHB 2467</p> <ul style="list-style-type: none"> ● Starting July 1, 2026, Washington workers can choose to continue participating in the WA Cares Fund if they move out of state. ● To become an out-of-state participant, workers must have contributed to WA Cares for at least three years (in which they worked at least 500 hours per year) and must opt-in within a year of leaving Washington. ● Benefits will become available for out-of-state participants starting in July 2030. ● DSHS will adopt rules that prohibit discrimination in WA Cares to apply to all state agencies, persons, and entities implementing the program. These prohibitions apply to both in-state and out-of-state participants as well as entities providing services to eligible beneficiaries outside Washington. <p>ESSB 5950</p> <ul style="list-style-type: none"> ● DSHS received appropriation to integrate summary statement of earned benefits into Benefit Application Management System to give workers ability to know where they stand in terms of qualifying years and incorporate this into long-term care planning
Administrative and Resource Impacts	<p>Feek: Our agency is working with the Office of Financial Management to assess how it is that, should I-2124 pass, ESD is prepared for the implementation of an expanded ability to opt out of the program.</p> <p>Open for questions:</p> <ul style="list-style-type: none"> ● King: If the initiative passes November 1st, and the election is finalized somewhere near November 21st, would people be able to opt out or would they continue to pay until January, since everything on a quarterly basis? And do you think you would be ready to accept those opt outs if they occur that early? <ul style="list-style-type: none"> ○ Feek: Those are questions we're navigating right now, and I don't have specific answers yet. In terms of the time frame, it's 30 days, so we're navigating what it looks like to be prepared should it pass, but knowing we are not necessarily in a spot to be able to do any sort of big preparatory work. We'll probably come back to this group to answer some of those questions once we've worked a little more with OFM. ● Keiser: ESD receives the premiums quarterly from employers, not from individuals. When individuals have an opportunity to individually opt out, how do you manage that? <ul style="list-style-type: none"> ○ Feek: We want to be prepared so there can be a good customer experience, but also not leave the employers high and dry. Right now, employers interface with their employees and send us a file, so we don't have an individual connection to that. We're trying to consider the experience for the employer, the employee, and any longevity on the future facing program. ● Keiser: Can you put an administrative estimate on how much that might cost ESD to do? <ul style="list-style-type: none"> ○ Feek: We had an initial cost that we're trying to work through with OFM, but I don't have a definitive number today. ● Meneses: It sounds like it's fair to say that currently you do not have the resources or capacity to do this switch, but you're studying that closely with OFM to understand what you need in order to make it happen if you have to pivot. <ul style="list-style-type: none"> ○ Feek: That's correct. ● Conway: Is the initiative clear on the implementation of opt out?



	<ul style="list-style-type: none"> ○ Feek: There are areas where there will have to be some additional clarity. The team is really focused on those details right now. There's also some concern that if the initiative passes, we have 30 days to implement, so that's a very narrow window to be prepared for the next wave of exemptions. • Conway: Will you be required to do any rulemaking around the implementation of all customers? <ul style="list-style-type: none"> ○ Feek: That's part of what we're trying to determine, but it seems likely. • Conway: How do we do all this in 30 days? <ul style="list-style-type: none"> ○ Feek: That's why I'm flagging it for this group. There's going to be some challenges in that. Right now, the engagement happens between the employer and the employee, but this initiative would have employees coming directly to ESD. We do some of that already, but on scale this would be different than what we're used to dealing with. ○ Amundson: We have reviewed the initiative thoroughly and if it were to pass, we would have to expedite our emergency rules that we would intend on proposing and then have to revisit those within a short period of time to determine their permanency. We do have plans for emergency rulemaking.
<p>Actuarial Analysis on 2124-XIL</p>	<p>Key Concept of Voluntary Programs</p> <ul style="list-style-type: none"> • Voluntary Program > Participation Choice > Potential for Adverse Selection • Adverse selection examples <ul style="list-style-type: none"> ○ Health status — Those with anticipated LTSS needs are more likely to participate ○ Wage level — Higher wage earners may be less likely to participate because premiums are assessed on all wages (with no cap) while benefit levels are the same for all participants <p>Adverse Selection Increases Program Risks</p> <ul style="list-style-type: none"> • Higher levels of adverse selection can lead to <ul style="list-style-type: none"> ○ Short-term solvency risk ○ Long-term affordability risk — insurance rate spiral <p>Next Steps</p> <ul style="list-style-type: none"> • If necessary, we recommended integrating risk-management best practices from voluntary programs • Risk-management practices cannot guarantee ongoing fund solvency <ul style="list-style-type: none"> ○ SHB 2467 may prohibit certain risk management practices, e.g., underwriting, for voluntary programs • Commission is considering the formation of a work group on contingency planning related to this issue <p>Open for questions:</p> <ul style="list-style-type: none"> • Conway: This is just risk analysis, right? It's not taking revenue into consideration at all. There's a lot of conversation about the fact we're using fixed income from our investment side. If we change the investment portfolio, would that affect the risk analysis? <ul style="list-style-type: none"> ○ Smith: Changing the way the fund is invested would certainly impact our analysis. I would also clarify; would it change or eliminate the risk that we just talked about under a voluntary program? I think you reached similar conclusions about adverse selection. Adverse selection and participant choice, I don't see that being impacted by how you invest in the program's absence. • Stensager: It seems like the adverse selection problem is pretty severe and I don't know if you're comfortable doing this, but in your professional assessment, is it valuable to pursue some alternatives here? And for those who opt out, do they get their money back or is that retained in the system?

	<ul style="list-style-type: none"> ○ Smith: The second question I would have to defer to others that are closer to the administration of the law in that area. The first question is starting to get too close to the ballot measure for me to comment, but I would refer you to the first bullet point on the slide. ○ Feek: People don't get their money back when they opt out. They opt out future-facing from that point forward.
<p>OSA's Planned Work for 2024</p>	<p>Recap of Recent Actuarial Analysis</p> <ul style="list-style-type: none"> • Milliman's 2022 WA Cares Fund Actuarial Study published in fall 2022 • Actuarial analysis on proposed and recently enacted changes to the program • Milliman's analysis and OSA work products support program solvency and LTSS Commission's WA Cares Fund Risk Management Framework <p>Recap of Risk Management Framework</p> <ul style="list-style-type: none"> • Funding goal: Provide secure and meaningful benefits at the lowest expected cost for beneficiaries now and in the future • Program currently in Phase 1 of risk management glidepath <ul style="list-style-type: none"> ○ Phase 1 expected to last until at least 2028 <p>Update on 2024 Annual Work Plan</p> <ul style="list-style-type: none"> • Anticipate sufficient budget for expected actuarial work • Actuarial analysis to support the Commission and work group policy considerations during 2024 where applicable • Milliman to study estimated Medicaid savings • Updated baseline analysis by Milliman expected to be published in late fall <ul style="list-style-type: none"> ○ Will include 2024 session impacts, updated assumptions, and early premium collection ○ If I-2124 passes, subsequent analysis will be required • Annual OSA Report on WA Cares Fund Solvency
<p>Commission Topics and Workgroups for 2024</p>	<ul style="list-style-type: none"> • Reconvening the Minimum Provider Qualifications Workgroup • Provider Payment Maximums Workgroup • Establishing the Contingency Planning Workgroup <ul style="list-style-type: none"> • Senator Conway made a motion to establish the Contingency Planning Workgroup. Mark Stensager seconded the motion. A vote was taken and 14 voted aye, 0 voted nay. The motion passed. <ul style="list-style-type: none"> ○ 7 Commission members volunteered to be part of the workgroup including Senator Conway, Maddie Foutch, Cathy MacCaul, Mark Stensager, Taylor Linke, Representative Harris, and Representative Macri.
<p>Report out from Minimum Provider Qualifications Workgroup</p>	<ul style="list-style-type: none"> • Stakeholder conversations are underway to discuss: <ul style="list-style-type: none"> ○ In-home personal care ○ Transportation ○ Adaptive Equipment and Technology ○ Environmental Modifications • The workgroup is meeting to discuss feedback. <p>Open for questions:</p> <ul style="list-style-type: none"> • MacCaul: One of the things that has become very clear to us since work on the program began, is the need to support our unpaid family caregivers through WA Cares. AARP wrote into the law a 3rd option for paying family caregivers and that is an opportunity to create a set of requirements that will help support our 820,000 family caregivers in this state. We believe it's important to allow beneficiaries the option to hire and pay their family caregiver directly. By permitting a variety of payment options, it would provide relief to family caregivers who face real financial, physical, and emotional



burdens in providing the care that they do. This can be done through WA Cares by minimizing the administrative and overhead costs that a beneficiary has to have through this direct payment option.

- King: I appreciate the concept being brought forward, I'm disappointed that we weren't even going to be allowed to put forth a motion to do this. But it's inconceivable to me that we are making individuals that want to take care of a loved one to either have to go through an agency or join a union in order to be compensated by the state, in this case with the money they've already paid in. I can understand why the agencies and the unions want to do this because it's a lot of money. I think the money ought to go to the individual that's providing the care, not to these institutions. If you want to join a union or an agency, go ahead. If you just want to take care of a loved one, you ought to be able to do that.
- Stensager: I'm interested in this option, but there are issues regarding assuring training, pay mechanisms, and so forth. But I'm worried about the duplication of other programs in terms of the overall cost. I think it's one of the most important parts of this legislation.
- Harris: I'd like us to require some training, make it simple and easy on the family members. We are allowed to do this in some other settings, and I think we need to look at that and have the opportunity to care for our loved ones.
- Foutch: The work in the Minimum Provider Qualifications Workgroup around family caregivers has been really helpful and I hope we can continue that conversation in that group. This is incredibly complicated and has to be done right to ensure quality of care and safety in any setting.
- Linke: The Health Care Authority is the agency responsible for payment of claims and for processing those payments to providers. While we have so far used the existing Provider 1 system to make those payments, there are alternatives to explore that don't go through ProviderOne. It was paid outside of that via a benefits card that was managed at HCA with a 3rd party entity. I just want to put that out there in case there is a desire to look at other mechanisms.
- Conway: We don't pay benefits until 2026, so we have a good deal of time to work this out. No need to rush through these complicated issues.
 - MacCaul: With respect, I want to emphasize that there is some urgency because this is a very complex issue with no road map. The Department has already filed a CR-101 for rulemaking, so we need to start figuring out the details.
- Cepoi: It seems like most people want to explore this option, so I hope we go forward with doing that. I'm toggling between all of it because I know with portability now in the picture, folks that are going to be accessing this benefit out-of-state may actually have more options using this benefit than they would in-state. We want to make sure the beneficiary is in the driver's seat and we're not putting the power of making those decisions to an outside entity.
- Egger: I'd like to propose to staff to hold another workgroup meeting before our next scheduled meeting so we can keep discussing the issue and what kind of rules we can make. **ACTION ITEM**
- Ficker: I appreciate all the work that's been done, but in order to truly understand these options, I'm hoping we can see some outlines of various proposals well in advance of our next opportunity to have this conversation.
- Harris: I was not aware about the card that Taylor had mentioned. I'm familiar with the benefit but not how it was administered. If I could get some information on that it's something I'd like to look at more. **ACTION ITEM**
 - Linke: We can do that. We talked about it in the portability workgroup, so we can dig up that information and refresh it for this purpose as well.
- Chopp: Would be helpful to see the actual language in the law when it was passed in dealing with this general option. Can that be sent to everybody? (This request was provided in the chat) The idea of continuing work on this 3rd option is really important, but we need to make sure we're doing it right. As I've said before, I want to make sure we have assurances that there will be a certain amount of training, so people's safety is being considered.

	<ul style="list-style-type: none"> • Meneses: I appreciate all the input. What I'm hearing people say is this deserves thoughtful consideration. It's a very, very important issue. I'm hearing people say they want an informed decision, and they don't feel they have enough information right now to make a decision today. I'd like to suggest that the workgroup meet again between now and the next scheduled meeting and to prepare some recommendations for the next Commission meeting in July. • Chopp: Thanks to Ben for already finding the language in the original law and sharing it in the chat. Great staff work. I also want to say that I agree with Senator Conway that we do have time on this as benefits don't kick in until much later, so let's not rush to judgement on this thing because it's extremely important.
Report out from Provider Payment Maximums Workgroup	<ul style="list-style-type: none"> • DSHS and Milliman have begun conducting a rates study to inform this work. • DSHS has started hosting meetings with stakeholders and public open forums to gather feedback on the rates analysis. • DSHS has been gathering feedback during these sessions to bring forward to the Commission workgroup. • The work is being conducted in groups, starting with Group 1, which includes Adult Family Homes, Assisted Living, Nursing Homes, and In-Home Personal Care <p>Open for questions:</p> <ul style="list-style-type: none"> • MacCaul: This was an enlightening conversation in the last meeting. There are some real challenges when we think about the maximums and the unintended consequences and economic ramifications, even though we want to have people be paid the most they possibly can. I worry about consistency within the whole entire system and not disincentivizing one part of the system over another. Because of the billions of dollars that will go into the system from WA Cares.
Public Comment	<ul style="list-style-type: none"> • Public comment was captured in the table below.
Review Agenda for July 10 meeting	<ul style="list-style-type: none"> • Approve 5/1/2024 Commission meeting minutes • Receive Program Update • Receive Finance Update • Report out from Minimums Provider Qualifications Workgroup • Report out from Provider Payment Maximums Workgroup • Report out from Contingency Planning Workgroup
Wrap-up <ul style="list-style-type: none"> • Action Item Review • Adjourn 	<ul style="list-style-type: none"> • Action items captured in the table below. • Meeting adjourned at 3:18 pm.

#	Action Items	Lead	Due Date
1	Share information with the Commission on Communications outlays	DSHS	7/10/2024
2	Sharing our estimates on shared savings if a Medicaid waiver were to be approved.	DSHS	9/11/2024
3	Schedule an additional meeting of the Minimum Provider Qualifications Workgroup	DSHS	7/10/2024
4	Share information on the pros and cons of alternative payment mechanisms	DSHS	7/10/2024



Name	Public Comment
Cathy Knight	<p>My name is Cathy Knight and I'm representing the Washington Association of Area Agencies on Aging. Our 13 member agencies support family caregivers across Washington. The WA Cares benefit will be a meaningful resource for families caring for their loved ones as they age. Our area agencies will be a front door to the WA Cares program. We want to make sure families will be excited and relieved when they learn about the benefit. Administrative expenses and bureaucratic processes for paying family caregivers will frustrate many and could limit the family's choices. We support a WA Cares option for people to hire their family members directly to provide care. Many families we work with are doing this now, using their personal funds. In our experience, many people are willing to care for a loved one but have no intention of being a professional caregiver once their loved one dies. It's just a different role. We support WA Cares offering options so families can choose what form of caregiving payment best meets their needs. Thank you for the opportunity to comment.</p>
Elizabeth Hovde	<p>Hi, thank you all for your time. During the 2024 legislative session, the portability legislation that passed did not take on the full recommendation you all gave lawmakers. I thought the recommendation for portability depended on portability being done in a cost neutral way and suggested doubling the number of hours worked in a year for eligibility purposes for all program participants. But the bill that passed did not increase the requirement for the number of hours work. It also created two different ADL standards for in state and out-of-state recipients, I assume because of industry standards requiring fewer ADLs than WA Cares does. That creates a considerable difference in eligibility for recipients and I'm concerned about that and expecting more solvency concerns because of the hours not changing. I have something else but let me get to this first. Finally, in last week's WA Cares webinar, and ESD employee said to people that they had to keep their private LTCI that they obtained to be exempted. Later on, I know it was added below the webinar recording on YouTube saying if you already have approved exemption, it's up to you to decide whether to maintain or cancel your private long-term policy. You should speak with your broker or agent. I'm worried about the advice. The Commission has discussed requiring recertification. And lawmakers have changed The law several times already. There was a bill proposed in 2023 that would prohibit recertification, but it died. If lawmakers change the law to require re-attestation or certification. I'm worried ESD should be giving that advice because it seems to me that if a person dropped the private plan, not only would they still be permanently unable to join WA Cares as law says they might be required to pay the tax during their working years even still. People are clamoring for an answer about what to do and I'm sure the long term care industry is confused by it all too.</p>
Lynn Kimball	<p>I'm Lynn Kimball, Executive Director of Aging and Long Term Care of Eastern Washington. We are the AAA serving Ferry, Pend Oreille, Spokane, Stevens, and Whitman Counties. I've been engaged in pushing for WA Cares to be user friendly and helpful for the folks we serve. Our community living connection staff pick up the phone when families face long term care needs. They help people of all incomes explore their care options and put together a plan which includes helping people navigate the complex Medicaid system. We want to see a WA Cares option for people to hire their family members directly to provide care. Many families we work with outside of Medicaid employ their own caregivers using their personal funds because it allows their dollar to stretch farther than using a home care agency. Families successfully navigate screening, interviewing, and payroll taxes even if they need help from a payroll service to do it. We also support making it easy for people to use their benefit to pay a neighbor for the cost of gas for getting to a doctor's appointment, to pay for the cost of lumber, the church volunteers used to build a ramp, and to reimburse family for buying grab bars on Amazon. Let's keep it simple. People who need long-term care and family caregivers have a lot on their plates. Thank you.</p>

Name	Public Comment
Stephen D. Forman	<p>This is Steven Forman speaking, Long Term Care Associates, as I think perhaps many of you know. Our firm helped pioneer the long-term care insurance industry, some 50 years ago here in the greater Seattle area. So as many LTC professionals are aware, the legislature added what it thought was a portability benefit this year in SHP 2467. But, due to the way the bill was written, it ended up being, in practice, an international benefit. So everyone though Washington Cares was going to catch this error before rushing the bill through, but we're thinking perhaps the change was intentional. Now, there's nothing wrong with an international benefit. In fact, this can be desirable. It's found in the private market, many policies. It's important you understand the ramifications of the choice the state has made. DSHS is now required under the law to approve providers and the Health Care Authority to pay claims to beneficiaries anywhere in the world. And the Employment Security Department to accept payroll taxes from (indecipherable) to matter where in the world they work. This obligates those agencies to a great deal more than I think they'd planned for and international benefit was not priced into Washington Cares. So, by law, Washington Cares now guarantees that vested Washingtonians can take their benefit with them anywhere in the world. And it's advertisement have not disputed this fact, nor should they. So, if this was an error, to date, no one has taken ownership. If this was deliberate, I trust Washington Cares will not walk back what has now been guaranteed. Thank you so much.</p>
Michael Tucker	<p>I come to you today, not as a former Commissioner, but as a volunteer with AARP, longtime volunteer with AARP. Commenting on behalf of its members and their caregivers, but I should point out that it's been a fundamental principle of AARP, from the very year it was founded in 1958, that what it does for one it does for all. So, when I speak as a member volunteer for AARP by extension, I really hope the Commission understands that AARP is really speaking for all people over 50 years of age, all seniors in the state of Washington, and their caregivers. I just want to thank the Commission for addressing the issue of the 3rd payment option today. And I echo the comments Commissioner MacCaul made earlier, and I'm glad to hear that the Secretary, as well as those Commissioners who have spoken, or committed to really addressing this 3rd payment option and bringing a greater urgency to this very necessary work that needs to take place. And while, yes, the benefits won't be started until 2026, and that seems a long way away, the complexity of the issue is one that's going to require a constant effort from now until a solution is achieved. And I think 2026 is going to come upon us so very, very fast. Faster than any of us thinks. And so, I just applaud the commitment on the part of the Commission to bring a greater sense of urgency to this issue. I look forward to joining and listening in on the next meeting and hearing a report that significant progress has been made.</p>
Louis Brownstone	<p>I'm the chairman of the California Long Term Care Insurance Services. Maybe I'm just ignorant as to what WA Cares can do about this voter initiative but not sure what WA Cares can do about the ballot initiative that would fundamentally change the whole program. But I thought this whole meeting would be devoted to defending the status quo, and figuring out ways to communicate to the public what a big factor this voter initiative would be by making this program completely voluntary. I would encourage you folks to get with this if you can. I don't know if you can technically or not, but if you can I would encourage you to get really on the ball here to try and defend your position. Thank you very much for the opportunity to speak.</p>

Name	Public Comment
Jim Ko	<p>Thank you for giving me the time to speak. I am a caregiver twice over. I cared for my dad until he passed away a number of years ago, and just this year I learned that I need to care for my 88 year-old aunt. So, I am what you call a typical family caregiver. I do it because it's my job and I love them and that's why I want to speak about this 3rd option. I'm a retiree, I had a nice career. I'm not really interested to join an agency or join a union now. I am just relaxing and enjoying my retirement, but in the meantime, I have this job to do, which is to take care of my relatives. So that's why I think it's very important. I see hopefully this 3rd path will be studied, agreed to, and passed eventually. I want to make sure everybody understands that not everybody wants to be so structured as a caregiver. And I clearly agree with some of the comments made by the senators and the legislators about training, but you many of the home caregivers, we are in that role. We learn how to do it out of necessity. So, again, training is welcome but that should not be the reason why we don't act on the 3rd option. And lastly, I just want to thank everybody on the Commission for working through the portability. I think that is making the program a lot more powerful for many people. Thank you.</p>
Val Wanke	<p>I'm a director of Axio Partners. We're a nationwide long-term care broker and so we work with other brokers to implement worksite long-term care plans, involving employers and employees down to 10 lives to over 300,000. During 2001, we had a lot of employers sign up for the individual private insurance. Out of the 481,901 – I'll piggyback on what Elizabeth had mentioned earlier. I bought my own policy back in 2003. So, when I went to put my exemption in I had my policy, I was ready to put in the policy number, the company, etc, etc. And all I had to do was say yes, I have a plan, with no information at all. So, number one, I think in that in that 481,901 I think you probably got some fraud on people who have opted out that really didn't have insurance. And then, now those though that actually did purchase policies, but now want to cancel them. Number one, how many of those are really going to inform their employer? That they drop their private coverage and therefor start paying into WA Cares? But again, my understanding was the exemptions are permanent. So, if you've got all these people that, you know, are really not in WA Cares and don't still have private insurance, you know, ultimately, they can still file Medicare claims. Medicaid rather. So, that really was your purpose in coming up with WA Cares to begin with was to decrease the amount of money that the state has to pay towards Medicaid. So, what I mean is you're still going to have an awful lot that can, you know, could potentially file Medicaid claims. Now granted, that should be a finite group, pretty much, in that anybody that's new that is hired can't get an exemption right now. And yes, the ongoing attestation. I agree with Elizabeth that, you know, I had asked numerous times and didn't get a real clear answer. And then what I'd heard back, you know, I figured it was closed. So there was not going to be any. And I think that leaves things open for difficulties. Thank you very much.</p>