

Meeting Date	7/15/2022	Time	2p – 330p
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Attendees					
✓	Representative Paul Harris	x	Representative Drew MacEwen	✓	Representative Frank Chopp
✓	Representative Nicole Macri	✓	Senator Curtis King	✓	Senator Judy Warnick
✓	Senator Karen Keiser	✓	Senator Steve Conway	✓	Secretary Jilma Meneses, Department of Social and Health Services (Chair)
✓	Commissioner Cami Feek, Employment Security Department	x	Taylor Linke, Health Care Authority	x	Peter Nazzal, Home Care Association Representative
✓	Madeleine Foutch, Representative of a union representing LTC workers	✓	Michael Tucker, Representative of an organization representing retired persons	x	Lauri St. Ours, Representative of an association representing SNF/ALF providers
✓	John Ficker, Adult Family Home Providers Representative	✓	Ruth Eggar, Individual receiving LTSS #2, or designee	x	Andrew Nicholas, Worker who is paying the premium (or will likely be paying)
✓	Brenda Charles-Edward, Individual receiving LTSS #1, or designee	✓	Rachel Smith, Representative of an organization of employers whose members collect the premium	✓	Laura Cepoi, AAA Representative

Guest Speakers					
	Ben Veghte, Department of Social and Health Services		Andrea Meewes Sanchez, Department of Social and Health Services		Bea Rector, Department of Social and Health Services
	Kristen Maki, Department of Social and Health Services		April Amundson, Employment Security Department		Travis Fish, Employment Security Department
	Matt Buelow, Employment Security Department		Chris Hanak, Washington State Investment Board		Paul DesJardien, Office of the Attorney General
	Yvonne Hayward, Pacific Life		Jeff Beligotti, New York Life		

Topic	Minutes
Welcome and Call to order	<ul style="list-style-type: none"> • Laura Cepoi, Brenda Charles-Edwards, and Rachel Smith were introduced as new Commission members. • Commission members in attendance indicated above. • Secretary Meneses announces Bea Rector being appointed as Assistant Secretary for DSHS • Porsche Everson reviewed the meeting goals
Consent Agenda	<ul style="list-style-type: none"> • Senator King made a motion to approve the minutes from the 04/18/2022 Commission meeting. Laura Cepoi seconded the motion. A voice vote was taken and the motion was passed unanimously.



New Business

Updates from Workgroups on Portability, Eligible Beneficiary Criteria, Private LTC Insurance Exemption Recertification/Rescinding, and Supplemental Private LTC Insurance

- Andrea Meewes Sanchez gave an update on the 3 workgroups and their considered options. Once vetted by the workgroup members, their draft options will be presented at the full Commission meeting in September.
- Update on Portability Workgroup
 - Considerations of options for conducting eligibility determinations for qualified individuals who subsequently move outside of Washington,
 - Alternative forms of benefits for out-of-state eligible beneficiaries,
 - Methods of cross-state coordination on LTSS providers,
 - Timing implications of extending benefits to out-of-state eligible beneficiaries with respect to short-term program implementation and long-term collaboration with other states establishing similar programs, and;
 - Options to address the cost of expanding benefits to people who leave the state
- Update on Eligible Beneficiary Criteria Workgroup
 - Ease of access to earned benefits
 - Seamless transitions to Medicaid LTSS
 - Transitions to a Private Long Term Care Insurance (PLTCI) policy
 - Ways to address cognitive impairment, instrumental activities of daily living, and specialty care, and
 - Impacts to program solvency
- Update on Private Long-Term Care Insurance Recertification and Rescinding of WA Cares Fund Exemptions Workgroup
 - Minimize administrative burden
 - Minimize negative impact on LTSS account solvency, and
 - Incentivize maintenance of coverage
- Update on Supplemental Private Long-term Care Insurance (SPLTCI) Workgroup
 - Bea Rector gave overview of the members involved in on this workgroup and the 5 core principles
 - The primary goal of the Workgroup is to support Washington's middle class in gaining access to affordable private long-term care insurance supplementing WA Cares.
 - Impediments to carriers offering SPLTCI coverage should be mitigated to facilitate the emergence of a vibrant, competitive market.
 - Given the significant long-term financial commitment entailed in a consumer purchasing private long-term care insurance and this market's goal of supplementing a state benefit, the state should be proactive in educating consumers about this complex product so they can make informed decisions.
 - To be marketed and sold as WA Cares supplemental coverage, SPLTCI policies should be designed to "extend" WA Cares coverage by avoiding discontinuities in care, particularly in covered care settings and providers.
 - Statutory changes to facilitate the emergence of a WA Cares supplemental market should apply only to this new market and not to the rest of the private long-term insurance market.
 - Ben Veghte gave report and reviewed the recommendations on the structuring of the SPLTCI market.
 - Consumer protection
 - Recommendations:
 - Develop consumer guide for people seeking SPLTCI coverage to help them make informed choices
 - Direct and fund Office of the Insurance Commissioner to expand Statewide Health Insurance Benefits Advisors (SHIBA) program to educate SPTLCI consumers (focus on middle-income market)
 - Create new section of statute in Title 48 to regulate policies that can be marketed and sold as supplemental to WA Cares
 - Should apply to SPLTCI products only and not disrupt current long-term care insurance market

- Should be sufficiently detailed and thorough to give consumers adequate information to protect them as they make decisions about purchasing a product that entails a substantial long-term financial commitment
 - Everything known about SPLTCI policies should be disclosed up front so consumers are not surprised later
- Venue for filing policies
 - Recommendation:
 - Washington State should endeavor to work through the logistical challenges for allowing “mix and match” to reach the agreed-upon goal of facilitating the development of a vibrant and competitive SPLTCI market
- Benefit trigger and elimination period
 - Recommendation:
 - SPLTCI deductible (monetary component of SPLTCI elimination period) should be equal to WA Cares full maximum lifetime benefit (starting at \$36,500) and automatically adjusted for inflation
 - WA Cares annual benefit inflation adjustment should be automatic, rather than an annual discretionary determination by the LTSS Trust Council
 - Carriers may not require that a client undergo a functional assessment or satisfy a benefit trigger in order to determine that a SPLTCI elimination period has begun or ended
 - Carrier may conduct a functional assessment and apply a benefit trigger for purposes of approving SPLTCI claim and authorizing SPLTCI benefits
 - SPLTCI policies must accept exhaustion of maximum WA Cares benefits (currently \$36,500) by a SPLTCI policyholder – or for WA Cares beneficiaries with partial benefits, exhaustion of WA Cares benefits and utilization of paid care which together total proposed statutory SPLTCI deductible (currently \$36,500) – as sufficient to satisfy monetary component (deductible) of SPLTCI elimination period
- Transition issues for near-retiree cohorts
 - Recommendations:
 - SPLTCI consumer guide and SHIBA counseling will work to educate near-retirees on cost and benefits of purchasing SPLTCI policies
 - Particular focus will be potential for a large deductible before the SPLTCI policy begins paying claims, its implications, and strategies for managing this
 - For SPLTCI policies marketed and sold to near-retirees, dollar component of elimination period (deductible) may be \$36,500 or less
- Continuity of covered care settings and providers
 - Recommendations:
 - Unless there is good-faith reason to believe a care setting or provider is not suited to meeting care and safety needs of a beneficiary, SPLTCI policies must allow continuity from WA Cares to SPLTCI coverage of care setting and provider, including family providers, so that SPLTCI “extends” WA Cares benefits without disrupting care
 - Carriers may audit for fraud, i.e., to determine whether care being billed is actually being provided
 - If a carrier determines a care setting or provider is not suited to meeting care and safety needs of a beneficiary the carrier may, effective 90 days after the transition from WA Cares to SPLTCI benefits, require a change in care setting or provider
 - Beneficiary will have right to appeal decision through third party independent review tracked by OIC

- In their covered care settings and providers, SPLTCI policies must generally include coverage of family providers
 - Coordination of benefits between WA Cares and SPLTCI policies
 - Recommendations:
 - To support seamless transition from WA Cares to SPLTCI, a process of reciprocal administrative notification should be developed:
 - When a WA Cares Fund qualified individual applies for WA Cares benefits, WA Cares Fund asks whether individual has SPLTCI coverage and if yes, requests written consent from the applicant to share this information with SPLTCI carrier for purpose of triggering SPLTCI policy's elimination period as well as any potential care coordination
 - When a Washingtonian purchases a SPLTCI policy, carrier requests written consent from policyholder to share this information directly with WA Cares Fund and if this consent is granted, shares that information with WA Cares Fund
 - Only basic demographic information that would allow a person to be identified in each system would be shared; no health information or data on claims.
- Senator Keiser provided context and comments on the SPLTCI workgroup work.
 - The goal of this optional supplemental policy is to address the concern of the original benefit being too small. This would be an option for middle income earners that don't want to stoop down to impoverishment to reach Medicaid levels and keep their assets intact. For those folks to purchase policies, the WA Cares Fund would be the deductible for the new supplemental plan, which would bring down the price point for the supplemental plan. If moving forward with this workgroup recommendations, it will require legislation in 2023. Consumer elements are quite strong but have to be fully implemented so people have the ability to make good choices.
- Yvonne Hayward provided context and comments on the SPLTCI workgroup work.
 - Urged the Commission to strongly consider acting on these recommendations and encourages further engagement with the workgroup members. This is going to be technical so it will require legislative fixes to address issues. Urges Commission to allow insurance carriers to allow mix and match policies. Further urges the Commission to swiftly implement the Commission's recommendations to annually recertify those that received exemptions from WA Cares Fund premiums.
- Jeff Beligotti provided context and comments on the SPLTCI workgroup work.
 - Gave information on New York Life, a mutual life insurance company in the United States. Spoke to the importance of portability so supplemental products can wrap around the WA Cares Fund and so individuals can still access care if they decide to move out of state. Believes that those who opted out of WA Cares Fund by purchasing private long-term care insurance should have periodic recertification in order to maintain their exemption. Supports a legislative change to WA Cares that would tie a 3% compound annual inflation to the benefit amount.

Opened up for questions

- Senator King – Wondering whether there was consideration given to the ability of an individual to find a long-term care policy that had better coverage and lower cost than the long-term care plus the supplemental plan. Can put requirements that if they don't maintain, there is a penalty and come back in. Other comment is that if going to look at now after bills have been passed, now going back to those individuals that bought LTC to meet the deadline and there was no requirement that they had to maintain those. Now if they are going to have to recertify, thinks that's a change in the law that would have objection to. Thinks going to need to look at allowing some individuals to buy a ltc plan, maintain it and that it might provide better coverage and lower cost than the WCF and supplemental plan.
- Senator Conway – thanks the group for the hard work and lots of issues considered. Hears some of Senator King's concerns. **If this is going to be a WA Cares Fund Supplemental plan, is there any liability to the state if a plan were to close? Would the state be liable for the benefits of one of those supplemental plans? In other words, it seems like if we**

Topic	Minutes
	<p>were going to market these as a supplemental to WA Cares, does the state have any liability for programs that do not survive? ACTION ITEM</p> <ul style="list-style-type: none"> o Ben Veghte – thinks that is a question for the Insurance Commissioner but can get back to them on this. o Senator Conway – Raised concern that this could raise the cost of the plan if there is an obligation of the state to be backing the benefits of the supplemental plan. <ul style="list-style-type: none"> • Secretary Meneses – will look into the liability question. Imagines there are ways to reduce liability upon signing up through disclaimers and so forth.
<p>New Business Update on Investment Plan</p>	<ul style="list-style-type: none"> • Chris Hanak provided an update on the Investment Plan <ul style="list-style-type: none"> o The WSIB approved the Long-Term Services & Supports Trust Account investment policy at its June 16, 2022, meeting o The customized fixed income investment program is designed to maximize return at a prudent level of risk while abiding by the constitutional limitations o The investment program will be actively managed by the WSIB with the following characteristics <ul style="list-style-type: none"> ▪ Invested in interest-producing debt securities with varying maturity, structure, and credit ratings ▪ Expected to meet or exceed the return of the Bloomberg U.S. Universal Index ▪ Managed to maintain a portfolio duration within plus or minus 25 percent of the index o The Board-adopted policy can be found at https://www.sib.wa.gov/docs/policies/2_35_600.pdf o The WA Cares fund will be invested in a similar manner to the fixed income component of the Retirement Funds' Commingled Trust Fund (CTF) o The WSIB has a long history of strong risk-adjusted performance in its actively managed fixed income portfolios o Milliman provided the WSIB with two cashflows scenarios from the most recent 2020 report o The more conservative scenario projected that approximately 45 percent of wage earners would opt out at the start of the program o The other scenario projected that approximately 3 percent of wage earners would opt out o Modeling of the recommended diversified fixed income portfolio projects the program will retain positive balances for at least 4 decades under both scenarios <p>Opened up for questions</p> <ul style="list-style-type: none"> • Senator Conway – The feds are raising interest rates; how do we expect this to impact your fixed income returns portfolio? <ul style="list-style-type: none"> o Chris Hanak – Fortunately in this case, no assets invested yet. Correct that as rates go up, expected returns will be higher in the future. They update capital market assumptions every 2 years, so will have a new set going into 2023. When looking at capital market assumptions, they look over a 15-year horizon. Not uncomfortable with the 3.6% they have right now. Had baked into them the idea that they would move higher than they were at the time they set the expectation. Not an unreasonable assumption that if they continue to see higher rates, there could be some type of change in that assumption. • Ruth Eggar – Does this mean that we won't be having another election asking voters to approve the investing in a similar way, like the last vote? <ul style="list-style-type: none"> o Chris Hanak – That's really a question for the legislature. At the WSIB they are responsive to what happens there. When builds policies, if nothing changes it is view on 4-year cycle. If there are changes made to the program, they would rework that in a timely fashion.

Topic	Minutes
<p>New Business Update on Shared Savings Waiver for Centers for Medicare and Medicaid Services</p>	<ul style="list-style-type: none"> • Bea Rector gave update on the Share Savings Waiver for Centers for Medicare and Medicaid Services <ul style="list-style-type: none"> ○ Data analysis shows significant Medicare savings ○ Discussions with Centers for Medicare and Medicaid Services are underway ○ Status report due to the office of financial management and the appropriate committees of the legislature by December 1, 2022. <p>Opened up for questions</p> <ul style="list-style-type: none"> • Senator Conway – What impact does this have? Is that on the state budget or the program itself? Who benefits from the savings? Is this a budgetary savings or having any impacts on our rates? <ul style="list-style-type: none"> ○ Bea Rector – WCF is covering services that Medicare otherwise might fund. We know WCF is going to divert or delay spending on both Medicare and Medicaid because WA Cares will be the first payer for long-term services and supports for people eligible for WA Cares. Medicaid is a shared program between the state and federal government, there will be some savings in terms of state spending. There is an interest in seeing if we could share in the federal side of savings for Medicaid. For Medicare, we know there's going to be savings in the federal dollars and would love to get an agreement from CMS to share some of the savings with us. It would be to the general fund state budget and also potential of federal payment to the state that could be used to offset expenditures in WA Cares or other places in the budget, depending on the decisions made in the legislature around that. • Senator Conway – if Medicaid was first payer and WA Cares was the second payer, would that not lower the rates of the long-term care benefit? It would be a saving to individuals if WA Cares was the second payer. In other words, if a person is eligible for Medicaid and Medicare, should that expense be born by the plan or the federal help we have? <ul style="list-style-type: none"> ○ Bea Rector – When legislation was first passed, everyone is concerned about Medicaid being the only payer of all long-term services and supports. People pay out of pocket until they impoverish themselves in order to access services under Medicaid. Having WA Cares be the first payer prevents that spend down and people are able to access the services they need under WA Cares without spending out of pocket for the services. Having WA Cares be the first payer does take risk off of private plan and should result in reduced premiums for people who want to purchase a supplemental plan. ○ Ben Veghte – That is whole set of questions that are far down the road right now since in the early stages of talking with CMS. Bottom line is that the shared savings from WA Cares benefit all Washingtonians by lowering the overall burden on contributors and taxpayers in the state to pay for long-term care. • Senator Keiser – Home Health programs have been successful at providing savings and see WA Cares having the same potential. Wonders whether they should consider capturing potential savings for the WA Cares Fund. Those savings wouldn't happen unless having the participation of tens of thousands of participants in the program. Would like to keep that as a potential element of legislation in future as we refine the WA Cares Fund. • Senator King – Curious about whether savings coming back to the state or using to lower or offset the premiums individuals pay. These savings are derived from people being mandated to be in the program. Thinks if we did this and the saving go back into the general fund, would call that a tax. Thinks it needs to go back so we can maintain or lower the premiums <ul style="list-style-type: none"> ○ Bea – Thinks these are decisions that would be up to the legislature

Topic	Minutes
<p>New Business Open Public Meetings Act Training Reminder</p>	<ul style="list-style-type: none"> • Paul DesJardien gave an update on the Open Public Meetings Act and provided a reminder for the training <ul style="list-style-type: none"> ○ Members need to take open public meeting training within 90 days of appointment and at intervals of no more than 4 years thereafter ○ Members who are local or statewide officials must also take basic records training ○ Open Public Meetings Act, Public Records Act Basics, and Record Retention and Management Basics are available online ○ It is recommended you document the training you received in your own records <p>Opened up for questions</p> <ul style="list-style-type: none"> • Secretary Meneses – How should the Commission members document/track this training? Will they receive a certificate? <ul style="list-style-type: none"> ○ Paul DesJardien – Sample certificates online but each agency has discretion on how it would document. Having documentation is a good idea and can list the trainer and training activities completed. ○ Secretary Meneses – Does the online learning module have an inventory of who is taking the training and when? ○ Paul DesJardien – Doesn't know if the training module keeps track. Can look into that. ○ Secretary Meneses – Requests that Ben follow up with the Commission members on monitoring protocols and how they can manage their proof of training. ACTION ITEM • Senator Conway – Suggested watching the training video during a meeting so there is record of it through meeting minutes. • Cami Feek – Was going to suggest similar suggestion as Senator Conway. Also flagged that some of the videos are unavailable at this time.
<p>New Business Expiration of the Collective Bargaining Agreement (CBA) clause for PFML and impact on employer reporting for PFML and WA Cares</p>	<ul style="list-style-type: none"> • Matt Buelow gave update on the expiration of the Collective Bargaining Agreement (CBA) clause for PFML and impact on employer reporting for PFML and WA Cares <ul style="list-style-type: none"> ○ Both paid leave and WA Cares contain a provision to exclude premium assessments from employees covered by a collective bargaining agreement. ○ Legislation passed in 2022 (2SSB 5649) sunsets this provision for paid leave only as of December 31, 2023. ○ ESD is implementing combined employer reporting for paid leave and WA Cares. <ul style="list-style-type: none"> ▪ Inconsistent CBA provisions make this harder for employers to understand and successfully complete required reporting. <p>Opened up for questions</p> <ul style="list-style-type: none"> • Senator King – Thinks the concept was to allow bargaining agreements to run their course, but might have to change language to align the two. <ul style="list-style-type: none"> ○ Matt Buelow – Have learned that some CBA's that don't expire and are required by law to continue. If there is no expiration date, they may never become eligible for program. ○ Senator King - Are they renegotiated? ○ Matt Buelow – sometimes, but during the pandemic many of them were not. • Representative Harris – Don't want to cause confusion and agrees that they need to get programs in sync.

Topic	Minutes
<p>New Business Enforcement authority to collect premiums and documentation/process for reporting self-employment income</p>	<ul style="list-style-type: none"> • April Amundson provided information about inconsistencies between PFML and WA Cares <ul style="list-style-type: none"> ◦ Enforcement authority for premium collection (penalty, delinquency, and interest structure) <ul style="list-style-type: none"> ▪ WA Cares does not have authority to require employers to participate. No current avenue for ESD: <ul style="list-style-type: none"> • To collect penalties from employers who do not report wages • To apply interest to unpaid premiums from employers • PFML authority in 50A.45 does not apply to WA Cares ▪ Process and documentation for ensuring accurate premium collection from self-employed • Ben Veghte provided information about both issues having actuarial implications and thought it might make sense to form workgroup to look these through these issues. Wanting to flag these issues to the commission and let them consider whether to form a workgroup and make recommendations for the full commission to consider <p>Opened up for questions</p> <ul style="list-style-type: none"> • Senator Conway – Requested a call from April Amundson. ACTION ITEM Wants to know how an employer would manage people who are part time or people who are self-employed but then become employed. Workforce is volatile and wondering how they will manage the volatility in terms of reporting. • Senator Keiser – Has a question on whether ESD, which allows self-employed people pay for unemployment insurance, could mimic that for the WA Cares self-employed? Can they align that? <ul style="list-style-type: none"> ◦ April Amundson – Self-employed individuals can elect coverage under that program. Doesn't know too much around unemployment insurance and if they are able to elect coverage in unemployment. Intends to align as much as they can for both employers and self-elected coverage. • Ben Veghte - Complicated set of issues and these questions touch to the core of complication. A lot of aspects that make it complicated and requires a lot more discussion. • Secretary Meneses made a motion to create a workgroup <ul style="list-style-type: none"> ◦ Senator Conway made a motion to approve the creation of a new workgroup. Madeleine Foutch seconded the motion. A voice vote was taken, and the motion was passed unanimously. • Secretary Meneses – Requested that Ben Veghte reach out to Commission members and request if would like to join the workgroup. Commission members would respond if interested. ACTION ITEMS

Topic	Minutes
<p>Old Business Communications and Outreach Activities</p>	<ul style="list-style-type: none"> • Ben Veghte and Kristen Maki gave an update on Outreach and Communication activities at DSHS <ul style="list-style-type: none"> ○ Outreach and Communications Overview ○ Key Audiences ○ Upcoming Planned Activities <ul style="list-style-type: none"> ▪ Contracted Activities ▪ Partner Roundtables ▪ Themed Webinars ○ Trackers and Reporting Tools • Travis Fish gave an update on Outreach and Communication activities at ESD <ul style="list-style-type: none"> ○ Employer Outreach Engagement <ul style="list-style-type: none"> ▪ ESD Employer Newsletter <ul style="list-style-type: none"> • Highly impactful communications medium • Provides agency with detailed metrics to track campaign efficacy • Audience of 225,000+ employers with workers localized in WA • Regular cadence employers are accustomed to — with option for special editions, as needed ▪ Webinars <ul style="list-style-type: none"> • Connects employers to knowledgeable WA Cares experts • Excellent opportunity to relay key information to professional associations and employer groups • Creates meaningful discourse with the WA Cares team ▪ Postal Mail <ul style="list-style-type: none"> • Classic communications medium • Employers likely to engage with official government letters • Highly effective with small businesses ○ Communicating New Exemptions Criteria <ul style="list-style-type: none"> ▪ Employers <ul style="list-style-type: none"> • ESD Employer Newsletter — Postal Mail <ul style="list-style-type: none"> ○ Workers often look to their employers to answer questions about benefits ○ Allows ESD to lift this burden by providing tools and information employers can use to answer questions or to guide workers to official sources ▪ Website <ul style="list-style-type: none"> • Secure platform where the most up-to-date, official information can be accessed • Creates a path for workers to follow when seeking information about WA Cares <p>Opened up for questions</p> <ul style="list-style-type: none"> • Ruth Eggar – requested that we send out webinar announcements and other information to commission members so they are up to date and can publicize them to others they know. ACTION ITEM
<p>Public Comment</p>	<ul style="list-style-type: none"> • Public Comment captured in the table below. • There was no written correspondence received.

Topic	Minutes
Review Agenda for September Meeting	<ul style="list-style-type: none"> Update on new actuarial baseline analysis (Office of the State Actuary) Potential pilot project in early 2026 to prepare for benefit implementation Report out from Commission workgroups and review of policy options Set 2023 meeting schedule <p>Opened up for other agenda items</p> <ul style="list-style-type: none"> Madeleine Foutch – When are policy recommendations due? Are there going to be debates around these recommendations at the September meeting, or only understanding where we're at and then in a future meeting making recommendations? <ul style="list-style-type: none"> Secretary Meneses- Recommends waiting until the Commission workgroups are ready to present their recommendations. Ben Veghte – Initial report outs due in September. Multiple meetings in the fall where there are opportunities to give feedback and hear multiple iterations of the reports. It will be an iterative process, but multiple meetings before things get finalized.
Wrap up Action Items Review Adjourn	<ul style="list-style-type: none"> Action items captured in table below Meeting adjourned at 3:30 pm

Action Items

ID	Meeting Date	Action Item	Owner	Due Date	Comments/Updates	Status	Completion Date
56	7/26/2022	Senator Conway requested a call from April Amundson					
57	7/26/2022	Need to discuss with OIC if the state has any liability for programs that do not survive in regards to the Supplemental Private Long-Term Care Insurance					
58	7/26/2022	Ben Veghte will reach out to commission members and ask if they would like to join the new workgroup regarding enforcement authority to collect premiums and documentation/process for reporting self-employment income	Ben Veghte				
59	7/26/2022	Ben Veghte will follow up with commission members on monitoring protocols for the open public meetings act training	Ben Veghte				
60	7/26/2022	Request that we send out webinar announcements and other information to commission members so they are up to date and can publicize them to others they know					

Public Comment



Name	Comment
Elizabeth Hovde	<p>My name is Elizabeth, I work with the Washington Policy Center, and thanks for being open to my comments today. I think it's in the best interest of Washingtonians to repeal the long-term care law you are guiding. That is the recommendation I am hoping for and that you have the opportunity to give now that we've seen so many problems. I know this commission has been working hard to navigate Washington Cares solvency concerns and the eligibility unfairness that was written into the law. But whether or not this fund remains solvent and whether or not more eligibility fairness is on the way, this is not the right way to conquer the long-term care crisis for the state. Or for Washingtonians. The benefit is inadequate for most people's long term care needs. You're a supplemental insurance talk today acknowledges that; my research shows that. There's also already discussion about the payroll tax increasing and the promised benefit decreasing. Lessening an individual's own ability to save, plan for, and afford their various life needs. This won't be the only one for some people. Encouraging more government dependency in offering state residents false hope is misguided. It is also not compassionate to take the money that a low-income worker needs today to finance the future needs of higher income people with more resources and who might not need help with long term care. WA Cares expands the government's safety net far too wide; we should be focused on helping those in true need. Instead of this fund, and this bay roll tax that harms workers, the legislature should work to raise awareness about people's need for long term care, and the coming payroll tax has already done this for many. Lawmakers should be encouraging more savings and ending the pathway for Medicaid abuse in which people are using Medicaid like a long-term care policy. It is not that. It should cut the taps on insurance products and remove regulations that make long term care insurance less affordable and available. Lawmakers and state agencies need to immediately stop the disinformation about this how this fund will meet people's needs and give them peace of mind as they age. Right now, the state is busy encouraging government dependency. One of the main WA Cares messages has been that you shouldn't have to use your money for your life needs. This is backward. It will damage the state. I have been watching the WA Cares webinars, part of the outreach being applauded here today by Employment Security Department and others, and they have been thick with bias and encouraging government dependency, entitlement attitudes and victim mentality. They are promoting the taxpayer payment of caregivers and unionization of family caregivers that I believe is going to make long term care more expensive for people in need of care and exacerbate their benefit more quickly. Again, I urge repeal of the state long term care law and I encourage other avenues to address the long-term care problem in our state. Washington Policy Council has several policy recommendations and would be Washington Policy Center, sorry, has several policy recommendations and would be happy to share them with you and offer the missing balance I see in this process. Again, I'm Elizabeth from the Washington Policy Center. Thanks.</p>
Steve Cain	<p>Thank you. I'm from LTCI partners, a distributor of long-term care insurance solutions. I also sit or chair on advisory committees or legislative working groups with NAFA, and NAHU, so industry trade groups that are representing agents and advisors and I want to commend the group for particularly the supplemental private LTC insurance group for looking at alternatives or supplemental plans to augment the Washington Cares Fund. I'm really encouraged by the work you guys have done, particularly the periodic or annual recertification as we in the insurance industry think that's really important for the health of our carrier partners and our books of business. But as it relates to what next in the state of Washington, if you're a consumer in the state of Washington and you are part of the WA Cares Fund, it's going to be hard to convince somebody to buy more. They naturally think they've got something, and there's so many myths and misconceptions about what's covered, that they probably think or going to think that three got enough. So, I would encourage the WA Cares Fund to really get behind the marketing so don't just count on the private insurance companies to share the message. I would hope that you're going to partner with them to educate Washington residents about the need for additional coverage. That's it. Thank you.</p>



Andy Sprague	<p>I am a Washington state resident, I reside in Tacoma, and I work for a local area construction contractor. And I represent myself and my family. I wanted to take the opportunity to speak after listening to some points that I heard during the meeting. I am very concerned regarding newly considered recertifications, and the new exemption requirement for continuous private coverage. Please reconsider moving forward with this new objective and requirement. I would like to offer background. For personal reasons, I chose to exempt out of WA Cares. To do so, I purchased a plan, the WA Cares legislation caused a rush to the market. This caused significant price escalation. Of note, I purchased from New York Life. New York Life, who presented during the meeting, is now seeding the opportunity to market new WA Cares supplemental packages. Due to the pry price of my insurance plan, coupled with inflation and a forecasted recession, I chose to cancel my policy. Per president legislation, I'm not required to continue coverage. Please also note that the WA Cares web page clearly states once exempt, you cannot join the WA Cares program. It specifically states your choice is permanent, if you apply and are approved for an exemption, you'll be permanently disqualified from WA Cares. This means you may never reenroll, and you'll be prohibited from getting WA Cares benefits even if you need them. For further consideration, if previously exempted citizens are now required to join WA Cares, the state should be liable for and pay for past private plan premiums. Again, I ask, please reconsider the new proposed requirement. I'm sorry, please reconsider the proposed new requirement that WA Cares exemption be based on continuous private coverage. While I trust this is done with good intentions, please do not allow manipulation of past legislation. Thank you very much for the consideration and the opportunity to speak.</p>
Alex Collins	<p>I'm Alex Collins, a financial planner with a local firm. I'm also part of the NAFA board, we did a tremendous amount of work with the public in on the Washington long term Cares Act ahead are the deadline last November. To Andy's point, there is a lot of uncertainty in the Washington public around whether coverage needs to be maintained, we've had folks call into the Washington State OIC and get conflicting answers as to whether or not they can replace a policy, whether they're going to be required to maintain a policy, and our clients and Washington citizens are taking action without clear confirmation from the legislature we would request that you guys figure this out sooner rather than later, and create some sort of a path for anybody who took action to have a policy restated or have the opportunity to restate a policy, things of that nature, so that the clients, the advisory community, and the carriers are harmed less by what's going on. I wholeheartedly applaud the idea and concept of having supplemental policies that is a great way to go ahead and bridge the gap between what is actually required or necessary or prudent for a Washingtonian to have in the way of long-term care with the limited benefit that the WA Cares act supplies. Appreciate your time, thank you for holding these. And I appreciate you having a way for us to provide some feedback. Thank you.</p>
Valerie Wanke	<p>It's Valerie Wanke, and I am an employee benefit consultant with Mercer, so I worked with well over a hundred employers and I don't know how many employees last year in working with them purchasing long term care policies. And so I do support the comments that I've heard today. Something that is really a question, but I know it's a statement too, I believe if I heard correctly, when you were speaking of the bargaining agreement, I understand that you want to bring those into so they're parallel so the Paid Family Medical Leave act and the Washington Cares Act are the same. So, if I heard as of December 31st of 2023, those who are under collective bargaining agreements will no longer be excluded from the Paid Family Medical Leave act. And I would ask that if you're going to have Washington Cares, those under collective bargaining agreements, also then have to participate in the Washington Cares Act Fund that you also then give them an opportunity to purchase individual policies to opt out. Because they would not have had that opportunity in 2021. Because they were under the impression that they were excluded. So just a comment on that. Thank you very much.</p>