

November LTSS Trust Commission Meeting Minutes

Meeting Date		11/7/23		Time		1:00 pm - 4:00 pm	
Attendees							
<input checked="" type="checkbox"/>	Representative Paul Harris	<input checked="" type="checkbox"/>	Representative Bryan Sandlin	<input checked="" type="checkbox"/>	Representative Frank Chopp	<input checked="" type="checkbox"/>	Representative Nicole Macri Chair
<input checked="" type="checkbox"/>	Senator Curtis King	<input type="checkbox"/>	Senator Judy Warnick	<input checked="" type="checkbox"/>	Senator Karen Keiser	<input checked="" type="checkbox"/>	Senator Steve Conway
<input type="checkbox"/>	Secretary Jilma Meneses, Department of Social and Health Services	<input checked="" type="checkbox"/>	Cami Feek, Employment Security Department	<input checked="" type="checkbox"/>	Taylor Linke, Health Care Authority (Trinity Wilson)	<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"/>	Michael Tucker, 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 type="checkbox"/>	Ruth Egger, Individual Receiving LTSS #2 (or designee or representative of consumers receiving LTSS)	<input checked="" type="checkbox"/>	Andrew Nicholas, Worker who is paying the premium (or will be paying)	<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)
<input checked="" type="checkbox"/>	Laura Cepoi, Organization Representing the Agencies on Aging	<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
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"/>	Rebecca Grady, Employment Security Department	<input checked="" type="checkbox"/>	Steve Zawoysky, Employment Security Department
<input checked="" type="checkbox"/>	Chris Giese, Milliman	<input checked="" type="checkbox"/>	Matt Smith, Office of State Actuary	<input checked="" type="checkbox"/>	Luke Masselink, Office of State Actuary	<input checked="" type="checkbox"/>	Nicole Ross, Employment Security Department

Topic	Minutes
Welcome and Call to Order	<ul style="list-style-type: none"> Commission members in attendance indicated above. Representative Macri reviewed the meeting goals.
Approve Consent Agenda	<ul style="list-style-type: none"> No objections were made; items were adopted.
Approve Agency Administrative Expenses Report	<ul style="list-style-type: none"> Laura Cepoi made a motion to adopt the Agency Administrative Report. Madeleine Foutch seconded the motion. A vote was taken, and the motion passed unanimously. Laura Cepoi volunteered to submit the report
WA Cares Fund Program Refresh	<p><u>Key program details per current statute (RCW 50B.04)</u></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, dressing, eating, ambulation, medication management, toilet use, transfer, etc.)
Finance Update	<p><u>Quarterly Reporting and Employer Support – Employment Security Department</u> Employer reporting and compliance continuous improvement</p> <ul style="list-style-type: none"> ● WA Cares is built on the same reporting system as WA Paid Family and Medical Leave (Paid Leave) <ul style="list-style-type: none"> ○ ESD has been receiving Paid Leave quarterly reports since May 2019 ○ A total of about 3 million employer quarterly reports received to date. ● Employers submit one report for WA Cares and Paid Leave <ul style="list-style-type: none"> ○ Legislature aligned key aspects of these programs, such as definition of wages. ● Continue to build on solid foundation, iterating on improvements to employer education and compliance activities. <ul style="list-style-type: none"> ○ Ensure alignment and distinction where needed between programs to facilitate employer customer success. <p>Reporting and Premiums process</p> <ul style="list-style-type: none"> ● Employers submit quarterly report of wages. <ul style="list-style-type: none"> ○ Employer agents/third party administrators may submit on employer's behalf. ○ ESD customer support is available via phone and email/secure message. ○ General Customer Support may escalate to specialized Employer Reporting team as needed. ● System calculates and invoices. <ul style="list-style-type: none"> ○ Quarterly report includes employer and employee identifiers, wages paid, and the associated hours worked, flag for exemption. ○ System uses employer wage report data to calculate premiums due for each program. ○ Generates invoices for premiums to be remitted. ● Employers remit premiums <ul style="list-style-type: none"> ○ Remittance may be via check, credit card, IAP, or ACH electronic transfer. ○ Employer agents / third party administrators may submit on employer's behalf. ● ESD finance team processes <ul style="list-style-type: none"> ○ From invoice generation to payment receipt and accounting. ○ Receipt of payment posted to customer account. ○ Workflows to issue refunds, assess NSF fees, and process other payment returns. ○ Inter-fund payment transfer between programs. ○ Account research as needed. ○ Fund balance and financial reporting. ○ Transition funds to SIB in accordance with cross-agency account workgroup planning.

First Quarterly reporting experience

- WA Cares reporting launch went well.
 - Over 10K employer quarterly reports processed in first week of October.
 - Most quarterly reports come in at end of reporting months.
- Premium totals for each quarter typically available at end of month following each reporting period.
 - Allows time for data to reach preliminary maturity.
 - Quarterly reporting at Commission meeting beginning in December.
- Sharing data with OSA for actuarial valuation and program solvency reports.
 - Projections vs actuals to be assessed in line with the Commission's Risk Management Framework.

Open for Questions:

- Conway: What about the independent contractors and those who are choosing coverage? Did we see much of that in terms of the first quarterly report?
 - Grady: Will have to get back on specifics with that. What they have here does not disaggregate. We have seen no extra calls in suggesting that there is a particular issue among that group.
 - Conway: Paid family leave has the same circumstance and assumes there can be some kind of comparison with the accounts with the Paid Family Leave to see if that sector is participating in the plan.
- Foutch: Had a similar question and was curious about the number of self-employed business owners and folks who had opted into the program, so curious to get that information in the future.

Monitoring Emerging Experience and Actuarial Reporting – Office of State Actuary

Monitoring Emerging Experience

- Milliman's 2022 study projected \$934 million in first year premium collections.
- Premium revenue is one of many variables in a 75-year projection.
 - Higher/lower initial premium revenue than assumed does not automatically mean financial projections will improve/worsen.
- It will be important to monitor premium collections and employer compliance to identify if differences are short-term or sustained.
- Sustained deviations could have long-term impacts, and it may take several years of data to make that determination.
- In the meantime, OSA and Milliman will be monitoring and reporting on incoming data.

Actuarial Reporting

- Milliman
 - Periodic actuarial studies and interim reports on emerging experience
 - Milliman will speak next on this topic.
- Office of the State Actuary
 - Annual solvency reports that include recommendations to maintain trust solvency and are informed by Milliman's reports and analysis.
 - Biennial actuarial valuations starting July 1, 2025, that inform program governance.
 - Pension Funding Council (future premium rates)

- LTSS Council (increases to lifetime maximum benefit amount)
- LTSS Trust Commission and Legislature

Open for Questions:

- Conway: Do you know what the inflation rate on wages was for Milliman in 2022? **ACTION ITEM**
 - Masselink: Not off the top of their head, but again these are 75-year projections. So, they recall that they have an inflation or wage inflation assumption that starts I think, like 2 3/4 of a percent and then it grades down over time to match what the Social Security uses in their reports. But if the question is relating to just recent high inflation, one thing to keep in mind is Milliman is not trying to capture year-over-year actual amounts perfectly. They set long-term assumptions and the goal here is to ensure that things look good or look reasonable for the long term.
 - Conway: They do inflation rate on the pension policy program. Would hope they would look at what they are using there as opposed to what Milliman is using on Social Security. Recognizing that there is certainly a movement of wages currently, which is good for the program because it improves revenue. Just hoping they will look at that factor because it's a major change recently in the economy. Wage inflation was pretty stagnant for many years announced starting to change.

Actuarial and Finance Update - Milliman

Actuarial Analysis and Modeling Updates

- Baseline studies may cover:
 - Program feature changes
 - OASDI Trustees Report updates
 - Economic assumptions
 - Demographic assumptions
 - Emerging program data
 - Experience analysis vs. expected.
 - Use current fund balance.
- Interim reporting may cover:
 - Current fund balance
 - Future projection updates for emerging program experience outside baseline studies, with considerations such as:
 - Develop thresholds for testing deviations from expected.
 - Develop framework for investigating when experience falls outside thresholds and when to update projections (if at all)
- Reporting of program metrics in consideration of risk management framework and key program goals

Upcoming Interim Actuarial Reporting

- Program data will be limited to premium and expense experience at start.
- To help evaluate actual premiums versus expected, we will compare against:
 - Projection from 2022 Actuarial Study
 - PFML program data

	<ul style="list-style-type: none"> • PFML premiums/premium rate adjusted for Social Security cap. • WA Cares Fund premiums/premium rate adjusted for exemptions and opt outs. • Initial challenges / considerations when examining emerging premium data: <ul style="list-style-type: none"> ○ Employer reporting patterns compared to Paid Family and Medical Leave program. ○ Potential reporting lag as premiums remitted for first time and exemption processing. ○ Seasonality of quarterly data versus annual estimate. ○ Influence of economic cycles (e.g., wage increases, labor force participation) ○ Interaction with other program features (e.g., vesting credit to become qualified individual) <p>Upcoming Interim Actuarial Reporting</p> <ul style="list-style-type: none"> • Incorporate historical premium and expense data to calculate current trust fund balance. • Project future program cash flows and fund balance <ul style="list-style-type: none"> ○ Cash flows likely to be developed using current modeling assumptions, pending any investigation of limited emerging experience.
<p>OSA Solvency Report and Recommendations</p>	<p>Preliminary Recommendations to Support Fund Solvency</p> <ul style="list-style-type: none"> • Clarify key program parameters to ensure program administration aligns with actuarial modeling. <ul style="list-style-type: none"> ○ Benefit eligibility threshold • In 2024, engage Milliman to re-assess program's long-term financial outlook. <ul style="list-style-type: none"> ○ To reflect emerging experience, any significant program changes enacted by the Legislature, and any clarification of key program parameters. ○ To inform OSA's 2025 actuarial valuation report • Ensure data systems collect and report information necessary for ongoing evaluation of trust solvency. <ul style="list-style-type: none"> ○ Opportunity to coordinate with broader program data needs. • Final solvency report to be provided in December meeting materials
<p>Minimum Provider Qualifications Workgroup</p>	<ul style="list-style-type: none"> • Meewes Sanchez: There is a lot to cover in the minimum qualifications workgroup and a lot of complex areas were discussed. Based on some additional stakeholder feedback we received since the draft report was released, we feel we need more time to discuss the minimum provider qualifications. We plan to reconvene the group and come back to the main meeting with additional feedback incorporated. We also heard there was not enough time for people to digest the minimum qualification recommendations that were made in September because they were introduced and voted on in the same meeting. Next year, we plan to address this by first introducing the workgroup recommendations in one meeting and then voting on them in a subsequent meeting. <ul style="list-style-type: none"> ○ King: I think this is a good thing to do. There's a lot of information and we need to make sure we get it right rather than rushing through. I would concur. ○ Keiser: I also want to concur. I think it's a good idea to revisit this after it has had more consideration. • Senator Keiser made a motion to rescind the vote on Minimum Provider Qualifications from the September Commission meeting. Senator King seconded the motion. A vote was taken, and the motion passed unanimously.
<p>Portability Cost Offsets: Vote on Workgroup Recommendations</p>	<p>Workgroup Recommendations:</p> <ul style="list-style-type: none"> • Workers who elect portable coverage upon leaving the state are required to contribute to WA Cares as long as they continue to work. • Workers report their earnings and pay premiums regularly and must provide documentation of their earnings at the time of payment of premium. ESD will research what documentation could be provided to verify wages at time of

	<p>payment of premium and any exceptions that should apply. ESD will consider user experience and develop ways to support individuals accurately reporting their earnings at time of payment. Once a worker turns 67, they are no longer required to provide such documentation, although they are still required to contribute on any wages earned through employment or self-employment.</p> <ul style="list-style-type: none"> • The Commission recommends that failure to remit assessed premiums on wages after electing portability of coverage will have consequences, including cancellation of coverage, or payment of back premiums and interest, or a combination of those. The Commission recommends ESD and DSHS research viable options to include in statute. • If an individual who elects portable coverage reports no earnings, the lack of wages earned through employment must be verified. • Senator Conway made a motion to adopt the recommendations regarding Portability Cost Offsets. Senator King seconded the motion. A vote was taken, and the motion passed unanimously.
<p>Review Draft Commission Recommendations Report</p>	<p><u>Portability Cost Offsets Workgroup Recommendations</u></p> <ul style="list-style-type: none"> • Incorporate into functional assessment a 90-day forward certification of need. <ul style="list-style-type: none"> ◦ Not an elimination period (typically used in private LTC insurance) ◦ Not a waiting period • Adopt a HIPAA-style benefit threshold for out-of-state residents. • Give State Investment Board authority to invest Trust Reserves in diversified portfolio, including equities. <ul style="list-style-type: none"> ◦ This would require a ballot initiative to amend the state constitution. • Require individuals to contribute 3 years in-state before they become eligible to participate in portable coverage. • Increase number of hours worked required to earn a qualifying year from 500 to 1000. • Continue to leverage the Risk Management Framework to regularly monitor emerging experience and its impact on actuarial status of the program. • Workers who elect portable coverage upon leaving the state are required to contribute to WA Cares as long as they continue to work. • Workers report their wages and pay premiums regularly and must provide documentation of their wages at the time of payment of premium. ESD will research what documentation could be provided to verify wages at time of payment of premium and any exceptions that should apply. ESD will consider user experience and develop ways to support individuals accurately reporting their wages at time of payment. Once a worker turns 67, they are no longer required to provide such documentation, although they are still required to contribute on any wages earned through employment or self-employment. • The Commission recommends that failure to remit assessed premiums on wages after electing portability of coverage will have consequences, including cancellation of coverage, or payment of back premiums and interest, or a combination of those. The Commission recommends ESD and DSHS research viable options to include in statute. • If an individual who elects portable coverage reports no wages, the lack of wages earned through employment or self-employment must be verified. <p><u>Benefit Eligibility Workgroup Recommendations</u></p> <ul style="list-style-type: none"> • Use an eligibility standard similar to Medicaid LTSS • Incorporate into functional assessment a 90-day forward certification of need. <ul style="list-style-type: none"> ◦ Not an elimination period (typically used in private LTC insurance)

- Not a waiting period
- Adopt a HIPAA-style benefit threshold for out-of-state residents if portability is enacted.

Open for questions:

- King: I just wanted clarification on the part about either 500 hours or 1000 hours. Am I correct in the assumption that if it was left at 500, if a person worked 490 hours, they would pay in, but they would get no credit for those for 490 hours? And if we made it 990 hours, the same would be true if it was 1000?
 - Veghte: That's correct. It's important to keep in mind, that this is during a qualifying year in any given year. Over the course of a career, most people work full time a certain number of years and part time maybe a few years when they're raising a child or caring for a family member or maybe caring for an older adult. Most people end up working 10 years, more than 1000 hours, which is a little less than half-time. In any given year, we had data on this that said 4% of people in a given year, work 500 hours but not 1000 hours, so it's a small group of people who fall in that gap in a given year. Over time, most people are going to qualify just by having paid in over their career even if they work less than 1000 hours in a given year.

Proposed Recommendations to include in report:

- **Non-immigrant Work Visas**
 - Modify the exemption process for temporary non-immigrant visa holders working in WA State. Exempt wages earned by non-immigrant visa holders from premium collection, with the ability to voluntarily participate if they so choose.
- **Civilian Employment of Service Members**
 - Allow for a voluntary exemption to be requested by active-duty service people who are engaged in off-duty civilian employment.

Open to questions:

- Keiser: ESD has brought forward an idea regarding the non-immigrant work visas and figuring out how to accommodate them with a different approach, perhaps an opt-in approach. Doesn't think they are quite ready to put a firm proposal together. As well as the issue of civilian employment for service members. ESD is also working on language to allow a voluntary exemption for active-duty service people who are engaged in off-duty employment. They are not quite ready to propose language, but they are two very active issues that should probably come before the Commission in December.
- Conway: What kind of visas does this apply to?
 - Jekel: The list of nonimmigrant work visa types is long. There are some that are most common that they hear about most frequently which are those professional specialty occupations and agricultural workers. But they would also hear from folks who are incoming nurses responding to a nursing shortage from out of country, trainees in particular occupations, and some religious occupations. There is a long list.
 - Conway: I have a question about H1. A lot of manufacturers in this state use H1 visas which are long-term workers. Curious whether they apply this same exemption to people for Paid Family Leave?
 - Amundson: They don't have the same requirements around Paid Family and Medical Leave. Paid Family Medical Leave, the worker takes their benefit eligibility with them no matter where they go. With the nonimmigrant work visas, they are targeting temporary workers in the state of Washington who work for a

	<p>relatively short period of time. The employers have to apply to hold these visas for those workers and they are not going to be staying in Washington and probably not a resident of the United States on a permanent basis.</p> <ul style="list-style-type: none"> ○ Conway: There is a time dimension to this exemption, is that right? ○ Amundson: Yes, they are temporary. ○ Jekel: There's a time component and by virtue of the various visa types. Part of the condition of holding the visa is they're here actively working in their occupation. It's incongruent if thinking about the availability to avail themselves of the WA Cares benefit where you'd be needing structured support with the activities of daily living, unless they change their immigration status and they're here in a different capacity. The likelihood they would be a nonimmigrant visa holder in Washington and be able to avail themselves of a WA Cares benefit would be narrow which differs from Paid Family Medical Leave. ○ Conway: It is certainly an issue if they think they need to do it. Hopes this is not creating a large issue here. If they define it properly, they don't have a problem with it, but knows we have all kinds of different visas used for temporary work in the state and some of these people stay for two or three years on these visas too. Just hopes that in the quest, they ensure that they have no impact on the contribution rate, or the wage rate percentage. Do you have a bill already before the committee or in the Governor's office? ○ Jekel: They submitted the bill for consideration to see what they will be proposing in terms of statutory language. They are asking that the Commission take this under consideration as a formal recommendation of the Commission. They submitted it as a concept when agencies submitted proposals to the Governor's office. ○ Conway: Did you ask about how many numbers we are talking about here? ○ Jekel: They did run numbers and they do not recall them off the top of their head. They did consider it to be not a sizable impact to the fund itself. ○ Veghte: Milliman has already priced in a very high rate of exemption in these categories. ○ Jekel: One more thing I would say about exemptions. They know they have heard previous presentations about the volume of exemption requests that have come in to date. It has been sizable and as far as the customer experience with it, many of these have been coming in paper form. ESD has been receiving inadequate information and boxes of paper applications. It has been a very difficult exemption category to make sure they are providing a good customer experience.
Public Comment	<ul style="list-style-type: none"> ● Public comment during the meeting was captured in the table below. ● There were 2 pieces of written correspondence received. They were attached to the meeting materials.
Review Agenda for December 12 Meeting	<ul style="list-style-type: none"> ● Approve 11/7/2023 Commission meeting minutes. ● Receive Program update. ● Receive Finance update. ● Approve Final Commission Recommendations Report. ● Review Draft Commission Topics for 2024. <p><u>Open for questions/comments</u></p> <ul style="list-style-type: none"> ● Conway: What committee will this report be sent to? <ul style="list-style-type: none"> ○ Veghte: My understanding is it goes to the legislature as a whole and DSHS sends that out. ○ Conway: Having been on a lot of different committees over the years, a select committee will make a recommendation to the legislature, and the legislators on that committee are usually the ones who present the bill to the legislature. Hopes that we think about how we want that to be done.

	<ul style="list-style-type: none"> Grady: ESD can answer the elective coverage opting-in question from earlier in the meeting, since they pulled those numbers while this meeting was going on. At this point they have 381 active elective coverage accounts for WA Cares. There will be another 136 accounts that become active on January 1st. As of January 1st, they will be up to 517. <ul style="list-style-type: none"> Conway: How does that compare to the numbers with Paid Family Leave? Grady: For Paid Family Leave, they currently have just under 5,000, but elective coverage is very different. For elective coverage for Paid Family and Medical Leave, there is an initial period where folks elect coverage for 3 years, and then after that it becomes an annual election of coverage, whereas with WA Cares it's a lifetime opt-in. Veghte: For context, there were no expectations that 1,000 people or more would be signing up in the first two months. It takes time to get the word out. People have to find out about it, learn about it, go to the website, and read about it, and then make a decision on a lifetime commitment. It will probably take 5 or 6 years before self-employed people across the state become well-aware of the program and get all the information, they need to make that kind of major decision. Encouraged to not overinterpret those numbers until 2030 or so.
Wrap-up <ul style="list-style-type: none"> Action items review Adjourn 	<ul style="list-style-type: none"> Action items captured in the table below. Meeting adjourned at 2:44 p.m.

#	Action Items	Lead	Due Date
1	Inflation rate on wages from Milliman in 2022	OSA	Dec 12, 2023
2	Reconvening the Minimum Provider Qualifications	DSHS	May 1, 2024
3	Send out language on 2 additional proposals made by Senator Keiser	DSHS	Dec 12, 2023

Name	Public Comment
Ana Ascanio	<p>I am a community organizer for We Care for WA Cares. We are a coalition of organizations and individuals impacted by long term care that have come together to support the WA Cares program. Over the past year I've had the privilege of collaborating with more than 20 community organizations such as Hand in Hand, Casa Latina, Fuse, and many more. Through these partnerships I have witnessed the profound impact of the crisis on individuals and families alike. What I have learned is everyone has been impacted by the long-term care crisis whether paying for their long-term care of themselves or caring for a family member. Throughout work I have seen firsthand that when people become informed about the benefits of the WA Cares fund program, they recognize the positive impact it can have on their life in community. I want to express today our appreciation for the vital work undertaken by this commission to enhance the program. Your dedication to improving the program is crucial and it does not go unnoticed. As a stakeholder coalition We Care for WA Cares is committed to playing a part and tirelessly tried to educate people across the state of the invaluable benefits of WA Cares. Thank you for your time and attention.</p>



Name	Public Comment
Kate White Tudor	<p>Thank you so much and I appreciate the opportunity to comment. I wanted to specifically thanks the commission for taking some more time on the provider qualification recommendations. I know folks who have worked hard but I know that I have been seeing the report last week and did a little bit of digging and found some issues that I really appreciate the opportunity to raise with you now and in the coming months as we work through those recommendations. I think that access needs to be a principal for everybody to keep in mind in looking at this issue. People who need long-term care need to be able to get it now and if we put unnecessary restrictions on who was allowed to provide a service or the types of qualifications you are supposed to have, we may end up not getting the access that we intend. As one of my colleagues said, the worst wheelchair ramp is the ramp that does not get built. I wanted to bring up the example of the personal emergency response systems because I've had some experience with that when my dad was going through his last couple of years when he had a couple of fall experiences. One memorable one is where he sat on his rolling walker without locking the brakes and rolled off his front porch into the flower bed. He was able to use his personal emergency response device to call for help. They called me and my husband and I went and managed to get him back up on the porch. It was a godsend to be able to help him. Another time he fell, and the emergency medical responders took him to urgent care where he was diagnosed with atrial fibrillation which had made him dizzy. These devices are lifesavers and require in the current draft to have a device only from a Washington State business. It will make it impossible to get my dad's device which was a Phillips lifeline. In fact, I looked at the US News and World Report list for the top 10 recommended PERS companies and they all headquartered outside of Washington State. I was not able to locate any that were in Washington State, and I think just by accident, the current draft of that recommendation will make it impossible for people to use their WA Cares benefit to get that important and lifesaving surface. I think some of those simple questions about if this restriction on this particular service makes it impossible for people to obtain it, that has to be the test that everybody has to think about going forward and I am deeply grateful for the opportunity to continue this conversation to get it right. Thank you.</p>

Name	Public Comment
Dina Burstein	<p>Hi. My name is Dana Burstein and I thank you for the opportunity to speak with you. I have a personal story about caregiving based on my family experience. My family has been living in a multigenerational home with our adult daughter, her husband and two young children. For about four years I worked as a nurse at Harborview, at a middle school in Renton until I retired when my mother and father needed help as they aged and experienced serious illness. My husband Robbie and I were happy to provide care for them in our home which is where they wanted to be. But of course, providing care comes with a cost of lost income, from scaling back or quitting work. As a mother who has experienced caring for both my own children and my parents, -- I know how important it is to have access to support and have financial resources to cover the cost that comes with caregiving. That is why I was so thrilled to learn about our state's new long-term care benefit WA cares. While unfortunately my husband and I will not be able to benefit because we are already retired, we are happy that my daughter and her husband will. The WA cares fund will be a lifeline if someday they are the ones who need care. My husband Robbie and I very much want to be able to stay in our own home until the end of our lives if possible. If WA cares had been around when we were working, we could if you start benefit to help support our daughter if she were able to be our caregiver. Now we are so fortunate that in our state, working families like my daughters will be able to use their WA cares fund to pay a family member or hire home care without sacrificing their life savings. I know how important it is to have access to support and financial resources to cover the cost that comes with caregiving. The added expenses of caring for a family member even for families who are secured financially, can mean making tough choices such as not building savings for retirement or paying for college for children. WA Cares is an innovative program and a really important piece of the puzzle needed to help us face the importance for care and how to pay for them. We are grateful that Washington is at the forefront of coming up with a thoughtfully designed program that will support my daughter's generation as they age. We are united across the generations in our support for the WA cares program. Thank you for your time and attention.</p>
Terry Bradford-Crane	<p>Absolutely, the first thing I would say is I would like to make sure that I have clarification on the explanation for the qualifying years. It's my understanding based on conversation that if an individual does not earn a qualifying year i.e., 490 hours per specific year, that of course doesn't qualify. Let's say an individual earned an average of 900 hours per year over a 10-year period. I would like to know whether or not that individual after 10 years, only has nine years that are qualified or if they would have 10 because you are looking at the average. So, if I could have that clarification, that would be great at some future point. I do consider myself a numbers nerd and I'm a comprehensive financial planner, I consider myself a financial literacy advocate. And age planning specialist. And an educator when it comes to financial situations or issues. I would like to thank Senator Conway for bringing up the concerns of small business owners. I know I asked WA Cares Fund during an email and webinar presentations about contribution requirements for small business owners that are also salaried LLC members that are married. Those partners that are married. And situations in which you have a non-salaried spouse, that wishes to sign up for WA Cares Fund. With a salary spouse that has to pay to the way care – the 50 basis points for WA Cares Fund tax. Whether or not if they are married, the net income will be taxed in entirety or the particular partner. If we can have clarification on that, especially for those individuals that attend help, who are serial entrepreneurs. And small business owners. We want to be clear on that in making sure we are able to plan for them in the most efficient way to stop thank you for your time.</p>