STRENGTHENING MICHIGAN'S CARE INFRASTRUCTURE: PATHWAYS TO UNIVERSAL FAMILY CARE



Friday, Oct. 9 2:00 - 3:30 pm ET A virtual forum



Marc A. Cohen, Ph.D. Academy Study Co-Chair

Co-Director LeadingAge LTSS Center @UMass Boston and Research Director at the Center for Consumer Engagement in Health Innovation, Community Catalyst

Purpose

- Describe LTSS Financing Challenge and Solutions
 - The case for Action
 - The advantages of a social insurance
 - Key decision points for states
- Describe Universal Family Care Solution
 - An integrated System
 - Holistic approach to Care policy
 - Advantages of Program





The Case for Action

• LTSS needs are growing even as families are becoming less able to deal with them

 Current system leaves most families paying out-ofpocket when need

• States are left holding the bag





Universal LTSS Could Support and Strengthen Families

- Social insurance could provide universal, affordable LTC coverage
 - Lack of affordable insurance mechanism for vast majority of Americans
 - Social insurance contributions would be generally more affordable than private insurance premiums today
 - Coverage designed to be nearly universal for the workforce, for all adults, or for society as a whole.
 - Contribution is **less than \$40** from the average worker's monthly earnings
- Stakeholders can certainly benefit from universal LTSS
 - Seniors, families and people with disabilities
 - Employers and workers
 - State governments
 - Insurers





Core LTSS Decision Points for States

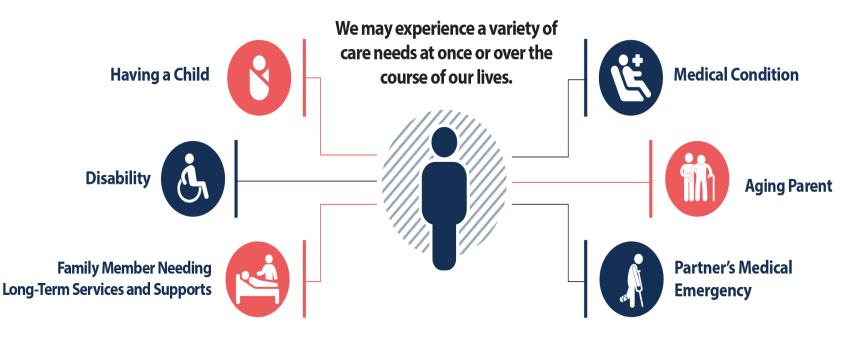
- Eligible population
- Timing and duration of coverage
- Who would benefit from alternative coverage durations and start times?
- Program Financing
 - Medicare payroll tax base
 - Medicare investment tax base
 - Medicare total tax base
 - Social Security tax base
 - Dedicated tax on personal income tax base
- Issues to consider in choosing funding source
 - Size of tax base
 - Affordability for the insured
 - Connection with program benefits
 - Fiscal sustainability
 - Political sustainability





Universal Family Care: Care Needs Occur over the Life Course









Universal Family Care: One Integrated Insurance System for Family Care Supports

- New social insurance program to which everyone would contribute while they are working and from which everyone would benefit.
- Integrated earned benefit covering care needs across life course:

EARLY CHILD CARE AND EDUCATION (ECCE)
PAID FAMILY AND MEDICAL LEAVE (PFML)
LONG-TERM SERVICES AND SUPPORTS (LTSS)

- Our families experience these needs and risks as interconnected and not in isolation.
- There are synergies to addressing them together.





Pillars of Universal Family Care

- Work is the foundation
 - Everyone who is working contributes and the program enables people to work.
- Single Access Point for Variety of Care Needs
 ➤ Supports change as care needs change.
- Flexible and Portable

Covers people across jobs, including 1099 income, across the life course as needs change.

- Invests in Care Workforce
 - Compensation, labor protections, career ladders.





Advantages of an Integrated and Universal Approach

• Universality: We all juggle work and care

Not just those with low incomes

• It is an efficient way to pay for care

> Families pay a little from each paycheck rather than a lot during time of crisis

• It is Family Friendly

> Allows families to focus on one other during care episodes

- One Stop Shop
 - Less red tape for families and states due to single access point, lack of means testing





Initial Estimates for Program Financing

| UFC Program | Social Security Payroll Tax Rate | Income Tax Rate | Medicare Tax | | Medicare Tax | | |
|---|---|--------------------|-----------------------|---|--------------------------------------|--|----------------------------------|
| | | | (if payroll tax only) | | (if payroll & investment income tax) | | |
| | | | Payroll tax rate | Additional rate on earnings > \$200k/\$250k | Payroll tax rate | Additional rate on earnings > \$200k/\$250k | Investment income tax rate |
| ECCE: NAS Illustrative Package PFML: Family Act LTSS: Front-End Coverage | 2.02% | 1.48% | 1.55% | 0.66% | 1.44% | 0.61% | 2.56% |





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Benefits to Society:

Bring common interests under single umbrella program

• Families

> affordability, lower enrollment barriers, better health outcomes

Workers

Reductions in lost wages and job loss

• Care Recipients

Less unmet need, greater flexibility, better health outcomes

Work Force

Improve quality of care jobs by needed infusion of funds

• State

Reductions in Medicaid growth and administrative savings

• Economy

Reduce poverty and more labor force participation

• Employers

Reduce lost productivity and employee turnover





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