



Coverage is Critical to Care

Why is *Cover All Pennsylvanians* (CAP) important to the quality of long-term care?

Quality care depends on quality jobs

- **Reliability for consumers.** Long-term care consumers report that a reliable, competent worker is critical to the quality of care they receive. These workers provide 80 percent of the “hands-on” care that Pennsylvania’s long-term care consumers depend upon each day.
- **Without coverage, workers are endangered.** Nationally, 2 in 5 direct-care workers lack health insurance. Direct-care workers without health coverage tend to go without medical care except in emergencies. An undiagnosed and untreated illness can force workers to miss work or leave the direct-care workforce altogether.

The quality of long-term care is an issue that affects you, your family, your neighbors and friends...all of us.

- **Demand is growing.** Pennsylvania has over 100,000 direct-care workers serving 760,000 long-term care consumers. Over the next 10 years the demand is expected to grow by 18 percent.
- **Long-term care consumers are in jeopardy.** Unless we take steps to make the direct-care job a quality job, we will leave hundreds of elders, and those living with disabilities and chronic conditions without a paid caregiver now and in the future.
- **A workforce in crisis.** Fast food and many retail workers have higher-paying jobs, often with better benefits than direct-care workers. Competition with these higher-paying jobs that include benefits means that fewer workers are entering Pennsylvania’s direct-care workforce, and many are leaving it.

It’s a smart investment

- **Employers can’t afford it.** Small businesses are an essential segment of Pennsylvania’s economy. Most small, independent home care agencies and long-term care facilities can’t afford the cost of providing affordable health insurance for their direct-care workers.
- **Coverage improves retention.** Direct-care workers with health insurance stay in the same job twice as long as those without coverage. The training and administrative cost of replacing direct-care workers who leave the workforce for better jobs is more than \$2,500 per worker.

Why do so many direct care workers lack health coverage?

- **It’s not offered.** Low medicaid reimbursement rates prevent most home care providers from offering insurance.
- **Most can’t afford individual policies.** Since direct care workers earn \$6.14 an hour less on average than other workers, purchasing individual health policies is out of the question.
- **Many can’t afford the current co-pays.** In a sample of direct-care workers, one in ten who were offered health coverage in nursing/residential care facilities declined the coverage and remained uninsured because they could not afford the premiums, deductibles, and co-payments.
- **Many aren’t eligible.** Many direct-care workers work part-time, and are ineligible for insurance that may be offered by their employers.

How will CAP help stabilize the long-term care workforce?

- Reduce Costs.
- Improve Quality.
- Expand Coverage.

What is CAP? CAP is a plan to provide all uninsured residents access to affordable health care coverage. CAP will focus on the people and small businesses that need the most help in paying for health insurance and will require employers who don't provide health care benefits to their employees to participate in paying for it.

Who is eligible for CAP? Small business employers will be able to participate if they have 50 or fewer employees who earn less than the state average wage. All uninsured Pennsylvanians, no matter what size company they work for, will be able to purchase affordable health insurance through CAP.

What will CAP cover? CAP will provide a basic benefit package similar to adultBasic, but with the addition of prescription drugs and some mental health and substance abuse treatment coverage.

What will CAP cost? CAP will help uninsured adults making less than \$29,400 (\$60,000 for a family of four). These individuals and families would pay between \$10 and \$70 per month for full health insurance coverage, including prescriptions, under the CAP program. Families over 300 percent of poverty have the option to buy into CAP at the state's cost of \$280 per adult. Small employers will be offered subsidized insurance (at \$170/month per employee) for their workers, who would also pay between \$10 and \$70 for their insurance. Children are already eligible for the CHIP program. (Call 1-800-464-KIDS to apply.)

Federal Poverty Level	Single Adult Max. Gross Income	Family of 4 Max. Gross Income	Monthly Premium per Adult Employee
0–100%	\$9,800	\$20,000	\$10
101%–200%	\$19,600	\$40,000	\$40
201%–300%	\$29,400	\$60,000	\$60
Over 300%			\$280

But CAP can do even better at insuring the direct-care workforce. Health Care for Health Care Workers would also support:

- Broadening the definition of small employer to include certain groups of long-term care providers, regardless of size, who receive the majority of their funding from certain categories of state waiver programs. The average size of a direct-care employer is more than 70 full-time employees.
- Allow employees who work at least 20 hours a week to qualify for CAP. Many direct-care workers take on several part-time jobs in order to work full-time hours.
- Increasing reimbursement to service providers for the cost they are incurring to provide insurance. CAP could include targeted reimbursement increases for health coverage with annual reconciliation to ensure funds were allocated for that sole purpose, or include the cost of insurance in a rate enhancement with annual reconciliation and adjustment as needed.