A 1663 -- Redline

Introduced to Amended -- Requires DOH to study cost of establishing long-term health care benefit for certain individuals.

Deletions ~~struck~~ · Insertions underlined

A1663 1R [First Reprint] ASSEMBLY, No.

CURRENT VERSION OF TEXT ~~Introduced~~As ~~Pending~~reported ~~Technical~~by ~~Review~~the ~~by~~Assembly ~~Legislative~~Health ~~Counsel.~~Committee on March 9, 2026, with amendments.

~~1.~~ 1. a.

The Commissioner of Health shall study modeling of public and private options for leveraging private resources to help individuals prepare for long-term health care services and support ~~needs.~~needs. The study shall model two options:

~~The study shall model two options:~~

and (2) A public-private reinsurance or risk-sharing model, with the purpose of providing a stable and ongoing source of reimbursement to insurers for a portion of the insurer's catastrophic long-term health care services and supports losses in order to provide additional insurance capacity for the State. b. Within 365 days following the effective date of this act, the Commissioner of Health shall prepare and submit a report containing all relevant findings to the Governor, and to the Legislature, pursuant to section 2 of P.L.1991, c.164 ~~(C.52:14-19.1).~~ (C.52:14-19.1)1, including the Chairs of the Assembly Aging and Human Services Committee, the Assembly Health Committee, and the Senate Health, Human Services and Senior Citizens Committee, or their respective successor committees1. The report shall include any recommendations for legislation or regulatory changes that would address long-term care health benefits, and include input from ~~the~~1[the Assembly Aging and Human Services Committee, the Senate Health, Human Services and Senior Citizens committee, and ~~other~~other]1 interested stakeholders. The report shall also include an analysis of each option listed in subsection a.

~~(1)~~(1) the expected costs and benefits for participants;

~~(2)~~(2) the total anticipated number of participants;

~~(3)~~(3) the projected savings to the State's Medicaid program, if any;

and (4) the legal and financial risks to the State. ~~c.~~ 1[c. ~~The Department of Health shall provide periodic status updates to the Assembly Aging and Human Services Committee and the Senate Health, Human Services and Senior Citizens committee prior to the submission of the Commissioner of Health's report pursuant to subsection b.~~

The Department of Health shall provide periodic status updates to the Assembly Aging and Human Services Committee and the Senate Health, Human Services and Senior Citizens committee prior to the submission of the Commissioner of Health's report pursuant to subsection b.

of section 1 of this act.]1 2. This act shall take effect immediately and shall expire upon the submission of the Commissioner of Health's report pursuant to subsection b.

~~2. This act shall take effect immediately and shall expire upon the submission of the Commissioner of Health's report pursuant to subsection b.~~

~~of section 1 of this act.~~

~~STATEMENT This bill requires the Department of Health to study the cost of establishing a long-term health care benefit for certain individuals.~~

~~Under the bill, the Commissioner of Health (commissioner) is to study modeling of public and private options for leveraging private resources to help individuals prepare for long-term health care services and support needs.~~

~~The study is to model two options:~~

~~(1) a public long-term health care benefit for workers, funded through a payroll deduction that would provide a time-limited long-term health care insurance benefit;~~

~~and (2) a public-private reinsurance or risk-sharing model, with the purpose of providing a stable and ongoing source of reimbursement to insurers for a portion of the insurer's catastrophic long-term health care services and supports losses in order to provide additional insurance capacity for the State. Within 365 days following the bill's effective date, the commissioner is to prepare and submit a report containing all relevant findings to the Governor, and to the Legislature. The report is to include any recommendations for legislation or regulatory changes that would address long-term care health benefits, and include input from the Assembly Aging and Human Services Committee, the Senate Health, Human Services and Senior Citizens committee, and other interested stakeholders. The report is to also include an analysis that considers: (1) the expected costs and benefits for participants;~~

~~(2) the total anticipated number of participants;~~

~~(3) the projected savings to the State's Medicaid program, if any;~~

~~and (4) the legal and financial risks to the State. Presently, the cost for long-term health care~~

~~in New Jersey may exceed more than $65,000 a year. The current average length of stay in a long-term care facility is 2.5 years. One national study, which projected nursing home use, suggested that, of the approximately 2.2 million persons reaching age 65 each year, more than 900,000 are expected to enter a nursing home.~~

~~A similar study reported that, among people who live to age 65, one in four would spend at least one year or more in a nursing home or other type of long-term care facility.~~

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