Washington State Long-Term Care Program

The Washington State Long-Term Care Program is a law that mandates long-term care benefits for Washington residents, funded by premiums collected from employee's wages.

KEY FACTS

- This is the nation's first public state-operated long term care insurance program.
- The program will be funded through employee premiums collected by employers starting January 1, 2022. The premium will be 0.58% of wages. Employers do not pay any share of the premium.
- To qualify for benefits, an employee must have worked and contributed to the fund for (1) a total of ten years without an interruption of five or more consecutive years or (2) three years within the last six years from the date the employee applies for benefits. The employee must have worked at least five hundred hours during each of the ten years or each of the three years, whichever is applicable.
- A qualified employee may become an eligible beneficiary by filing an application with the Department of Social and Health Services and undergoing an eligibility determination that includes evaluating whether the employee requires assistance with at least three activities of daily living.
- Beginning January 1, 2025, benefits will become available to eligible beneficiaries.
- Benefits will be paid out at \$100 dollars a day, with a maximum lifetime limit of \$36,500, to access services and supports like professional personal in-home care, an assisted living facility, or a nursing home, etc.



EXEMPT EMPLOYEES

- Employees may seek an exemption from being assessed the premium by filing an application with the Employment Security Department (the "ESD").
- To qualify for the exemption, an employee must be over the age of eighteen and must attest that he or she purchased long-term care insurance prior to November 1, 2021.
 - An employee applying for an exemption must do so between October 1, 2021 and December 31, 2022.
- Once an employee becomes exempt, the employee remains exempt permanently.
- If the ESD approves the employee's exemption, the ESD will send the employee an approval letter. The employee will need to provide that letter to the employer.
- If the employee fails to provide the approval letter to the employer, the employer will deduct premiums from the employee's wages until the employee provides the approval letter. The employee will not be entitled to a refund of the premiums that were collected prior to the employee providing the letter to the employer.

EMPLOYER RESPONSIBILITIES

- Employers must collect the premiums from employee wages and remit them to the ESD, just like they do with paid family and medical leave premiums.
- If an employee is approved for an exemption by the ESD, the employee must provide a copy of the approval letter to the employer. The employer must maintain a copy of the approval letter.
- If an employee is exempt from premium assessments, the employer must not collect premiums from that employee.
- If an employer continues to collect premiums from an employee after the employee has provided an exemption approval letter from the ESD, the employer will be responsible for refunding premiums collected after being notified of the employee's exempt status.

IMPORTANT DATES & DEADLINES

Employee premiums Benefits under the Program Opt-out application first become available begin to be collected window begins JANUARY1, OCTOBER1, OCTOBER 31, DECEMBER 31, JANUARY1, 2021 2021 2022 2022 2025

Last day an employee can purchase alternate long-term insurance

Opt-out application window closes

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