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(Original Signature of Member)

119TH CONGRESS
1ST SESSION

H. R. ||

To amend title II of the Social Security Act to provide for long-term care insurance benefits, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

Mr. SUOZZI introduced the following bill; which was referred to the Committee on ■■■■■■■■■■■■■■

A BILL

To amend title II of the Social Security Act to provide for long-term care insurance benefits, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Well-Being Insurance
5 for Seniors to be at Home Act” or the “WISH Act”.

6 **SEC. 2. FINDINGS; PURPOSE.**

7 (a) FINDINGS.—Congress finds the following:

8 (1) More than half of Americans entering old
9 age today will have a long-term services and sup-

1 ports (in this section referred to as “LTSS”) need,
2 averaging \$298,000 costs per person for about 2
3 years of serious self-care disability, and more than
4 half will be out-of-pocket, according to the U.S. De-
5 partment of Health and Human Services (in this
6 section referred to as “HHS”).

7 (2) The population age 85 or older (which is a
8 proxy for the number of elders needing LTSS) will
9 double between 2022 and 2035, and nearly triple by
10 2050. This aging will outpace the number of work-
11 ing-age people, including family members, who can
12 help seniors financially or with unpaid care.

13 (3) Research has shown that most U.S. seniors
14 could only afford less than a year of nursing home
15 care, assisted living care, or extensive home care
16 using their financial resources. Some can get by
17 using unpaid (family) care, but most rely on a com-
18 bination of paid and unpaid care.

19 (4) More than 1 in 5 middle-income seniors will
20 end up impoverished, Medicaid eligible, and mostly
21 using Medicaid to cover their LTSS costs.

22 (5) Millions of older Americans—1 in 5—will
23 need LTSS for more than 5 years, with a price tag
24 that would impoverish nearly all American house-
25 holds if they faced that need. HHS projections show

1 that older adults who need LTSS for more than 5
2 years incur nearly half of all LTSS expenses and 60
3 percent of Medicaid's LTSS spending.

4 (6) Only 1 in 10 American adults (11 percent)
5 have any private coverage for LTSS expenses, leav-
6 ing almost all middle-class American families to ex-
7 haust their nest-eggs and become impoverished be-
8 fore qualifying for Medicaid.

9 (7) The Nation urgently needs to create meth-
10 ods for ordinary Americans to be able to take re-
11 sponsibility to plan for the risk of a substantial pe-
12 riod of disability during retirement years.

13 (8) Given that Americans move and work across
14 State lines so frequently, State-based LTSS plans
15 encounter difficult administrative issues. Therefore,
16 a solution to address LTSS needs for seniors must
17 be anchored in a Federal insurance plan. Addition-
18 ally, since the time just after onset of disability is
19 more predictable and manageable, a Federal insur-
20 ance plan should cover the risk of especially long pe-
21 riods of long-term care, leaving the early period of
22 need to personal responsibility.

23 (9) Those methods must also responsibly sup-
24 port the workforce providing supports and services.

1 (b) PURPOSE.—The purpose of this Act is to enable
2 most Americans to make plans that protect themselves
3 and their families, to enable disabled older adults to sup-
4 port themselves in their communities during periods of se-
5 rious disability, to support the workforce providing direct
6 services to elders living with disabilities, and to reduce
7 what is now necessary reliance on Medicaid.

8 **SEC. 3. LONG-TERM CARE INSURANCE BENEFITS.**

9 (a) IN GENERAL.—Title II of the Social Security Act
10 (42 U.S.C. 401 et seq.) is amended by adding at the end
11 the following:

12 **“SEC. 235. LONG-TERM CARE INSURANCE BENEFITS.**

13 **“(a) IN GENERAL.—Every individual who—**

14 **“(1) has attained retirement age (as defined in**
15 **section 216(l)(1));**

16 **“(2) has filed an application for long-term care**
17 **insurance benefits;**

18 **“(3) is insured for long-term care insurance**
19 **benefits (as determined under subsection (c)) at the**
20 **time such individual’s application is filed; and**

21 **“(4) has a continual serious functional dis-**
22 **ability (as defined in subsection (d)) and, at the time**
23 **such individual’s application is filed, has had such**
24 **disability for a substantial period of time (as deter-**
25 **mined under subsection (e)),**

1 shall be entitled to a long-term care insurance benefit for
2 each month beginning with the 1st month in which the
3 individual meets the criteria specified in paragraphs (1)
4 through (4), and ending with the earlier of the month in
5 which the individual dies or the 1st month in which the
6 individual no longer has a continual serious functional dis-
7 ability (as so defined).

8 “(b) BENEFIT AMOUNT.—Such individual’s long-
9 term care insurance benefit for each month shall be an
10 amount equal to the product of—

11 “(1) an estimate, to be determined by the Sec-
12 retary of Health and Human Services in consulta-
13 tion with the Department of Labor, of the median
14 cost of 6 hours per day of paid personal assistance
15 in the United States, indexed to wages in the long-
16 term care sector, multiplied by

17 “(2) the ratio (not greater than 1) of the num-
18 ber of quarters of coverage the individual has during
19 the applicable base period (as defined in subsection
20 (c)(2)) to 40.

21 “(c) DEFINITION OF INSURED STATUS.—

22 “(1) IN GENERAL.—For purposes of subsection
23 (a), an individual shall be insured for long-term care
24 insurance benefits in any month if the individual has

1 6 quarters of coverage during the applicable base pe-
2 riod.

3 “(2) APPLICABLE BASE PERIOD.—For purposes
4 of this subsection, the term ‘applicable base period’
5 means the period that begins with the 1st quarter of
6 2026.

7 “(d) DEFINITION OF CONTINUAL SERIOUS FUNC-
8 TIONAL DISABILITY.—For purposes of subsection (a), an
9 individual shall be considered to have a continual serious
10 functional disability if the person is a chronically ill indi-
11 vidual (as determined under section 7702B(c)(2) of the
12 Internal Revenue Code of 1986) and is expected to remain
13 a chronically ill individual (as so determined) for at least
14 1 year or until the individual’s death.

15 “(e) DEFINITION OF SUBSTANTIAL PERIOD.—

16 “(1) IN GENERAL.—For purposes of subsection
17 (a), a substantial period of time means—

18 “(A) in the case of an individual who, at
19 the time described in paragraph (3), has aver-
20 age indexed monthly earnings for long-term
21 care equal to or less than the dollar amount
22 representing the 40th percentile in the table es-
23 tablished under subsection (f) for such calendar
24 year, 12 months; and

1 “(B) in the case of an individual who, at
2 such time, has average indexed monthly earn-
3 ings for long-term care greater than such dollar
4 amount, 12 months plus 1 additional month for
5 each 1.25 percentile interval above the 40th
6 percentile for which the individual’s average in-
7 dexed monthly earnings for long-term care
8 would attain (as specified in such table).

9 “(2) TABLE OF EARNINGS.—

10 “(A) IN GENERAL.—The Commissioner of
11 Social Security shall establish a table, for each
12 calendar year beginning with calendar year
13 2026, setting forth—

14 “(i) the dollar amount representing
15 the 40th percentile among the average in-
16 dexed monthly earnings for long-term care
17 (as determined under subparagraph (B))
18 of each individual who has attained age 62
19 and whose primary insurance amount is
20 first computed during such calendar year
21 (or, for calendar year 2036, during any
22 previous calendar year); and

23 “(ii) the dollar amounts representing
24 percentiles over 40 (increasing linearly
25 from 40 in intervals of 1.25) among the

1 average indexed monthly earnings for long-
2 term care (as so determined) of each such
3 individual.

4 “(B) DETERMINATION OF AVERAGE IN-
5 DEXED MONTHLY EARNINGS FOR LONG-TERM
6 CARE.—For purposes of this subsection, the av-
7 erage indexed monthly earnings for long-term
8 care of an individual shall be determined under
9 section 215(b) (as in effect on the date of en-
10 actment of this Act) as if such section were
11 amended—

12 “(i) in paragraph (2)(A), by striking
13 ‘reduced—’ and all that follows through
14 the end and inserting ‘reduced by the num-
15 ber of benefit computation years for which
16 no wages were paid in and no self-employ-
17 ment income credited.’; and

18 “(ii) in paragraph (2)(B)(ii), by strik-
19 ing ‘1950’ and inserting ‘2025’.

20 “(3) TIME OF CALCULATION.—The time de-
21 scribed in this paragraph is—

22 “(A) in the case of an individual who has
23 40 quarters of coverage during the applicable
24 base period (as defined in subsection (c)(2))
25 prior to becoming entitled to old-age insurance

1 benefits, the time at which the individual's pri-
2 mary insurance amount was first computed
3 with respect to the individual's application for
4 such benefits; and

5 “(B) in the case of any other individual,
6 the time at which the individual files an appli-
7 cation for long-term care insurance benefits
8 under this section.

9 “(f) PROVISION OF INFORMATION RELATING TO OB-
10 TAINING LONG-TERM CARE.—The Commissioner of So-
11 cial Security shall provide to each individual entitled to
12 a long-term care insurance benefit under this section, as
13 soon as practicable following the first day of the first
14 month of such entitlement, information describing the
15 steps the individual may take to obtain long-term care,
16 including an explanation of the services (including care
17 planning, care management, and administrative services
18 for hired care providers, by referral or in-house, for a fee)
19 provided by, and the appropriate contact information for,
20 the Aging and Disability Resource Centers described in
21 section 202(b)(8) of the Older Americans Act of 1965 and
22 the area agencies on aging (as defined in section 102(6)
23 of such Act).

24 “(g) PROVISION OF BENEFICIARY INFORMATION BY
25 ANY PERSON.—Any person may submit applicable infor-

1 mation with respect to an individual's application for long-
2 term care insurance benefits, an annual statement de-
3 scribed under subsection (i)(2), or any other information
4 required to be submitted by the individual under this title,
5 including, as applicable, the individual's representative, or
6 any family member or other appropriate person.

7 “(h) TREATMENT OF LONG-TERM CARE INSURANCE
8 BENEFIT PAYMENTS.—A long-term care insurance benefit
9 payment shall not be regarded as income and shall not
10 be regarded as a resource for any month, for purposes
11 of determining the eligibility of the recipient (or the recipi-
12 ent's spouse or family) for benefits or assistance under
13 any Federal program or under any State or local program
14 financed in whole or in part with Federal funds.

15 “(i) ADDITIONAL REQUIREMENTS.—

16 “(1) RELATING TO WAGES AND WITHHOLDING
17 RULES.—An individual entitled to a long-term care
18 insurance benefit for a month during a calendar
19 year shall, in any case in which such individual hires
20 an employee who is not a family member to provide
21 paid personal care to the individual during such
22 month, comply with all applicable State and Federal
23 laws relating to—

24 “(A) the payment of a minimum wage; and

1 “(B) the withholding of payroll taxes and
2 other employment-related taxes.

3 “(2) ANNUAL STATEMENT.—An individual enti-
4 tled to a long-term care insurance benefit for a
5 month during a calendar year shall submit a state-
6 ment to the Commissioner of Social Security at least
7 once during such calendar year, as directed by the
8 Commissioner—

9 “(A) affirming that the individual—

10 “(i) continues to have a continual se-
11 rious functional disability (as defined in
12 subsection (d)); and

13 “(ii) is in compliance with the laws
14 described in paragraph (1); and

15 “(B) specifying the country of residence of
16 the individual.

17 “(3) NONPAYMENT OF BENEFITS IN CERTAIN
18 CASES.—No long-term care insurance benefit shall
19 be payable to an individual for any month—

20 “(A) with respect to which the individual
21 fails to satisfy any of the requirements de-
22 scribed in the preceding paragraphs of this sub-
23 section; or

24 “(B) beginning after the fifth consecutive
25 year with respect to which the individual has re-

1 ported, in the annual statement required under
2 paragraph (2), a country of residence other
3 than the United States (including any territory
4 of the United States).”.

5 (b) ESTIMATES OF BENEFITS.—Section 1143(a)(2)
6 of the Social Security Act (42 U.S.C. 1320b-13) is
7 amended—

8 (1) in subparagraph (D), by striking “and” at
9 the end;

10 (2) in subparagraph (E), by striking the period
11 at the end and inserting “; and”; and

12 (3) by adding at the end the following:

13 “(F) an estimate of the potential long-term care
14 insurance benefits payable to the individual.”.

15 **SEC. 4. ESTABLISHMENT OF FEDERAL LONG-TERM CARE**
16 **INSURANCE TRUST FUND.**

17 (a) IN GENERAL.—There is hereby created on the
18 books of the Treasury of the United States a trust fund
19 to be known as the “Federal Long-Term Care Insurance
20 Trust Fund”. The Federal Long-Term Care Insurance
21 Trust Fund shall consist of such gifts and bequests as
22 may be made as provided in section 201(i)(1) of the Social
23 Security Act (42 U.S.C. 401(i)(1)) and such amounts as
24 may be appropriated to, or deposited in, the Federal Long-

1 Term Care Insurance Trust Fund as provided in this sec-
2 tion.

3 (b) APPROPRIATION.—There is appropriated to the
4 Federal Long-Term Care Insurance Trust Fund out of
5 moneys in the Treasury not otherwise appropriated—

6 (1) for each of fiscal years 2026, 2027, and
7 2028, \$12,000,000 for the initial establishment of
8 the Long-Term Care Insurance program and pay-
9 ment of benefits during such fiscal years; and

10 (2) \$50,000,000 for public education relating to
11 the Long-Term Care Insurance program as de-
12 scribed in section 6(a).

13 (c) MANAGEMENT OF TRUST FUND.—The provisions
14 of subsections (c), (d), (e), (f), (i), and (m) of section 201
15 of the Social Security Act (42 U.S.C. 401) shall apply with
16 respect to the Federal Long-Term Care Insurance Trust
17 Fund in the same manner as such provisions apply to the
18 Federal Old-Age and Survivors Insurance Trust Fund and
19 the Disability Insurance Trust Fund, except that the Man-
20 aging Trustee (within the meaning of subsection (d) of
21 such section) may invest such portion of the Federal
22 Long-Term Care Insurance Trust Fund as the Managing
23 Trustee considers appropriate in conservative market se-
24 curities.

1 (d) ADMINISTRATION.—There are authorized to be
2 made available for expenditure, out of the Federal Long-
3 Term Care Insurance Trust Fund, such sums as may be
4 necessary to pay the costs of the administration of section
5 3, including start-up costs, technical assistance, outreach,
6 education, evaluation, and reporting.

7 (e) REPORT.—Not later than 5 years after the date
8 of enactment of this Act and every 5 years thereafter, the
9 Board of Trustees (as defined for purposes of title II of
10 the Social Security Act) shall submit a report to Congress
11 evaluating the impact of long-term care insurance benefits
12 under section 235 of such Act and making recommenda-
13 tions relating to potential geographical adjustments of the
14 amount of such benefits.

15 (f) ALLOWING GIFTS TO BE MADE TO THE FEDERAL
16 LONG-TERM CARE INSURANCE TRUST FUND.—Section
17 201(i)(1) of the Social Security Act (42 U.S.C. 401(i)(1))
18 is amended—

19 (1) by striking “, or the Federal” and inserting
20 “, the Federal”; and

21 (2) by inserting after “in such Trust Fund)”
22 the following: “, or the Federal Long-Term Care In-
23 surance Trust Fund established under the Well-
24 Being Insurance for Seniors to be at Home Act”.

1 **SEC. 5. EDUCATION AND OUTREACH.**

2 (a) **PUBLIC EDUCATION PLAN.—**

3 (1) **IN GENERAL.**—Not later than 90 days after
4 the date of enactment of this Act, the Secretary of
5 Health and Human Services, in consultation with
6 the Commissioner of Social Security, shall publish in
7 the Federal Register a 10-year plan to educate the
8 public about the likelihood of needing long-term
9 care, the nature of the experience of long-term care
10 in various situations, the costs of long-term care, the
11 availability of long-term care insurance benefits, and
12 the importance of planning and considering private
13 insurance coverage alongside family support and
14 savings (especially during the first years of a serious
15 disability). Such plan shall be modified as necessary
16 based on research on the effectiveness of various
17 strategies and modifications with experience.

18 (2) **FUNDING.**—There are appropriated, out of
19 the Federal Long-Term Care Insurance Trust Fund,
20 to the Secretary of Health and Human Services
21 \$50,000,000 to carry out paragraph (1).

22 (b) **INDIVIDUAL NOTICES.—**

23 (1) **IN GENERAL.**—Beginning 1 year after the
24 date of enactment of this Act and in accordance with
25 paragraph (2), the Commissioner of Social Security

1 shall provide to each eligible individual a notice that
2 specifies—

3 (A)(i) the average indexed monthly earn-
4 ings for long-term care that would be calculated
5 for the individual under paragraph (2)(B) of
6 section 235(e) of the Social Security Act if such
7 average indexed monthly earnings for long-term
8 care were calculated in the month before the
9 month such notice is provided; and

10 (ii) for purposes of applying such section
11 to the individual, the percentile in which such
12 average indexed monthly earnings for long-term
13 care of the individual would fall among the av-
14 erage indexed monthly earnings for long-term
15 care (as determined under such paragraph
16 (2)(B)) of each individual whose average in-
17 dexed monthly earnings for long-term care are
18 calculated in such month;

19 (B) the number of quarters of coverage the
20 individual has in the month before the month
21 such notice is provided for purposes of attaining
22 insured status for long-term care insurance
23 benefits under such Act; and

24 (C) in any case in which the individual has
25 a continual serious functional disability (as de-

1 fined in section 235(d) of such Act), the date
2 on which such disability began.

3 (2) TIMING.—A notice described in paragraph
4 (1) shall be provided—

5 (A) by mail—

6 (i) to each eligible individual not later
7 than 540 days of the date of enactment of
8 this Act; and

9 (ii) to each eligible individual in the
10 month the individual attains age 45, age
11 55, age 65, and retirement age (as defined
12 in section 216(l) of such Act); and

13 (B) for each eligible individual who has at-
14 tained age 35, by making such notice available
15 on the individual's account on the website of
16 the Social Security Administration, to be up-
17 dated annually.

18 (3) ELIGIBLE INDIVIDUAL.—In this subsection,
19 the term “eligible individual” means an individual—

20 (A) who has a social security account num-
21 ber; and

22 (B)(i) who has wages or net earnings from
23 self-employment; or

24 (ii) with respect to whom the Commis-
25 sioner has information that the pattern of

1 wages or self-employment income indicate a
2 likelihood of noncovered employment.

3 **SEC. 6. GAO REPORT ON PERFORMANCE OF THE WISH PRO-**
4 **GRAM.**

5 Not later than 5 years after the date of enactment
6 of this Act and every 3 years thereafter, the Comptroller
7 General shall submit a report to Congress including—

8 (1) a description of the likelihood of manipula-
9 tion of eligibility criteria by beneficiaries or bene-
10 ficiary advisors and recommendations as to the mer-
11 its of possible remedies;

12 (2) a description of the likelihood of financial
13 exploitation or elder mistreatment by others on
14 whom a beneficiary is dependent or otherwise con-
15 nected and recommendations as to the merits of pos-
16 sible remedies, including the merits of imposing a fi-
17 nancial management service or fiscal intermediary as
18 has often been implemented by states in Medicaid's
19 Cash and Counseling program; and

20 (3) a description of the marketplace and con-
21 sumer understanding of long-term insurance offer-
22 ings and recommendations as to the merits of pos-
23 sible remedies, including the merits of standardizing
24 insurance offerings to improve consumer under-
25 standing.

1 **SEC. 7. REPORT ON REMAINING LONG-TERM SUPPORTS**
2 **AND SERVICES NEEDS.**

3 Not later than 3 years after the date of enactment
4 of this Act and every 3 years thereafter, the Secretary of
5 Health and Human Services, acting through the Adminis-
6 trator of the Administration on Community Living and in
7 consultation with the Commissioner of Social Security,
8 shall submit a plan to Congress that includes—

9 (1) estimates of the long-term services and sup-
10 ports needed by individuals who are not eligible for
11 benefits under section 235 of the Social Security
12 Act, including individuals disabled in childhood, indi-
13 viduals living with disabilities before retirement age,
14 and individuals who are not insured for benefits
15 under such section; and

16 (2) proposed strategies and costs of mitigating
17 unmet needs for such individuals.