

Amendment to the Chairman's Mark

Offered by Representatives Lujan Grisham, Yarmuth, Lee, Higgins, Wasserman Schultz, Khanna, Jayapal, Jackson Lee, and Schakowsky

Improving the Availability of Long-Term Care Services and Supports for Seniors and Other Americans

1. At the end of Title IV, add the following:

“DEFICIT-NEUTRAL RESERVE FUND FOR IMPROVING THE AVAILABILITY OF LONG-TERM CARE SERVICES AND SUPPORTS.

The chairman of the House Committee on the Budget may revise the allocations, aggregates, and other appropriate levels in this resolution for any bill, joint resolution, amendment, or conference report that improves the availability of long-term care services and supports for senior citizens and individuals with disabilities, by the amounts provided in such measure if such measure would not increase the deficit for either of the following time periods: fiscal year 2017 to fiscal year 2022 or fiscal year 2017 to fiscal year 2027. Such improvements may include creation of a comprehensive long-term care insurance program; pilot programs or studies to determine the best options for improving access to long-term care services; or other improvements to Medicare, Medicaid, or other programs to provide increased access to long-term care.”

2. Amend the committee report to reflect the following policy assumptions:

The resolution supports initiatives to provide seniors and other Americans with improved access to long-term care services.

Many Americans, especially seniors, struggle to afford the help they may need to accomplish daily tasks. Long-term care insurance, while available to some Americans through private insurers, remains unaffordable for most Americans. As a result, much of the cost of caring for ailing Americans falls on family members and local communities.

The resolution accommodates deficit-neutral legislation to improve access to long-term care services. Such legislation could include a comprehensive long-term care insurance program; studies or pilot programs to determine the best options for improving access to long-term care services; or changes to Medicare, Medicaid, or other programs to improve access to long-term care.