The Program and Policy Preferences of California's 50+ Population: Considerations for Long-Term Services and Supports Financing

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Background and Purpose

California is facing significant demographic pressures; by 2050, one in four Californians will be 65 or older.[1] Over half of all individuals turning 65 will develop a disability that requires long-term services and supports (LTSS) to help with basic activities of daily living, with an average need for assistance of over two years and a cost of approximately $120,000 in today's dollars.[2] Currently, Medicaid (Medi-Cal in California) is the dominant payer for LTSS but the Medicaid program is designed for those whose incomes typically fall below the poverty line. Approximately four in ten California adults age 50 and older have incomes that put them out of reach of Medi-Cal but unlikely to be able to afford paying for LTSS out of pocket.[3] This population is financially vulnerable and may have difficulty navigating and accessing services.

As part of **California's LTSS Financing and Affordability Initiative**, NORC conducted a survey of Californians age 50 and older with incomes at or above 139% of the Federal Poverty Limit, which is the income eligibility threshold for Medi-Cal. We asked the survey respondents about their preferences for programs to help cover the costs of LTSS and find services and providers as they age. **Details about the survey can be found in the Appendix.**

A companion Chartbook presents findings from a similar survey of Californians age 50 and older that focuses on their concerns about potential LTSS needs and preparedness for paying for such care, which can be found **here**.

This Chartbook

This chartbook is organized around the following themes:

- Awareness of LTSS need and who pays for this care
- Preferences for aging in place
- Preferences for educational programs to better understand how to find care and pay for it
- Preferences for paying for LTSS if needed
- Preferences for information and referral programs
- Preferences for programs to remain socially connected
- Preferences for caregiver supports among current/previous caregivers
- Preferences for learning about how to use home equity to pay for LTSS among homeowners

Analyses presented here reflect all respondents and acknowledge a critical subset of individuals in the "Overlooked Middle" – those with incomes between 139-500% FPL. This equates to an annual income (in 2024 dollars) of $20,784 to $75,300 for a single-person household and an annual income of $28,208 to $102,200 in a two-person household.[4] These individuals may be able to initially afford basic living needs but would have to reduce expenditures on those when LTSS needs arise.

A note on the data: Unless otherwise noted, comparisons of sub-populations on selected metrics are statistically significant with a p-value of less than 0.05 ($p<0.05$).

Context: Awareness of LTSS Need and Payment Is Low Among California's 50+ Population

Survey respondents were asked about their awareness around their own need for LTSS and understanding of who pays for this kind of care. Findings reported here are consistent with those presented in **The Concerns and Financial Readiness of California's 50+ Population: Considerations for Long-Term Services and Supports Financing**, based on a different survey of California residents.

- 1 in 10 respondents understand both their likelihood of needing LTSS and who pays for it.
- Majority (80%+) are unaware that LTSS is primarily paid for out-of-pocket, incorrectly assuming Medicare would cover it.
- Respondents in the Overlooked Middle are less aware of LTSS needs and payment responsibilities than those with higher incomes (>500% FPL).

Executive Summary

Key Findings: Preparing for Aging in California—Long Term Services and Supports Needs, Preferences, and Affordability Challenges

The California LTSS Survey was fielded between December 1, 2025 and January 6, 2026. A representative sample of 1,305 California residents age 50 and older and with incomes at or above 139% of the Federal Poverty Limit completed the survey. We provide a summary of the findings from this survey around key themes.

Who Are California's "Overlooked Middle"?

- Respondents in the "Overlooked Middle" (139–500% FPL) are a primary focus of this survey; they earn too much for Medi-Cal but often cannot afford LTSS out-of-pocket.
- Respondents in the Overlooked Middle are diverse; nearly half are homeowners (45%), and 35% have assets ≥$250K.

Affordability & Financial Vulnerability

- Nearly 60% are not confident they can afford LTSS; lack of confidence is highest among:
  - Respondents in the Overlooked Middle (73%, compared to 44% of respondents with incomes greater than 500% FPL)
  - Those with < $250k in assets (83%)
  - Non-homeowners (78%)
- Homeownership is a major buffer: 46% of homeowners feel financially prepared vs. 22% of non-homeowners.

Program Preferences & Priorities

Most Valued Supports

- Financial assistance to help pay for LTSS is the top priority: 58% of respondents rank it as the most important type of LTSS support program, valued more highly than other types of support (e.g., help finding care, support for family caregivers, etc.).
- Respondents were asked to prioritize among the financial support programs; 68% of respondents choose expanding Medicare to cover LTSS as their top priority.
- Nearly 15% of respondents prioritize a new approach that would offer an income-based buy-in to Medi-Cal.

Information & Navigation Needs

- Respondents highly value information-based LTSS resources: most prefer a free, easy-to-use website, a toll-free number to call, or an in-person resource center.
- Preference for in-person vs. web-based assistance does not differ by income, race, age, or health, but caregivers and those who engage in planning behaviors lean toward in-person help.

Caregiver Realities

- Half of respondents are current or former caregivers.
- Their biggest challenges are balancing caregiving with other responsibilities and managing their own health needs.
- Financial support (90%) and respite services (81%) are top caregiver program priorities.

Aging in Place & Home Equity

- Over 80% of respondents expect to age in place.
- Top supports desired: utility cost assistance (38%) and home repair/safety upgrade assistance (38%).
- Four in ten homeowners are interested in learning how to use home equity to pay for LTSS, especially those who have previously tapped into their home equity.

Survey Respondents

By the Numbers: Characteristics of All Survey Respondents

N=1,305 Respondents with Incomes ≥139% FPL

49% Male

51% Female

52% Age 50-64
29% Age 65-74
19% Age 75+

49% White, Non-Hispanic
24% Hispanic
19% AAPI, Non-Hispanic
5% Black, Non-Hispanic
3% Other Race

44% College Graduate+ Degree

52% 139% - <500% FPL
46% 500%+ FPL

47% Retired
45% Working
8% Other

52% Household Assets $250K or More

58% Married

22% Live Alone

77% Homeowners

24% Non-English Language Spoken

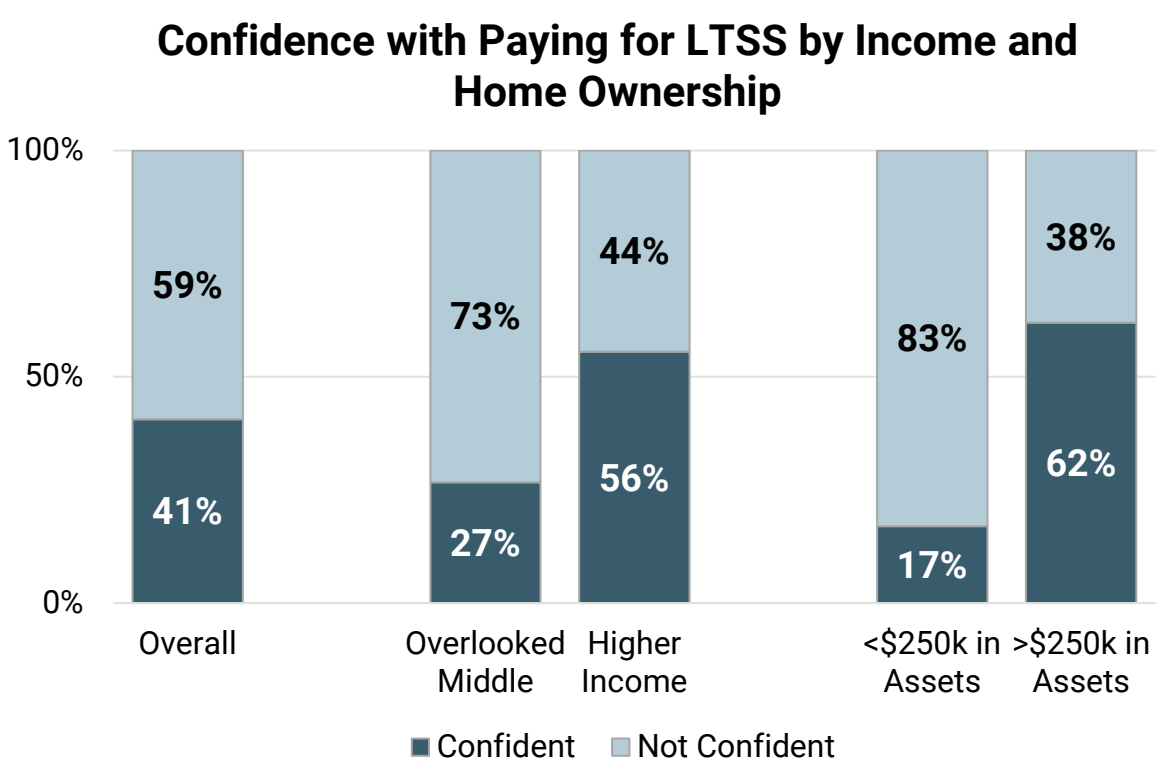
Respondents in the Overlooked Middle—those with incomes above 139% and below 500% of the Federal Poverty Level (FPL)—occupy a distinct position between public eligibility and private affordability. Like higher-income respondents (500% FPL or higher), they earn too much to qualify for Medi-Cal coverage of LTSS; unlike higher income respondents, they often lack the financial resources needed to pay for care out of pocket as they age.

Compared to higher-income respondents, respondents in the Overlooked Middle face a constellation of demographic, health, and financial characteristics aligned with **increased long-term care risk**. They are older on average and more likely to be female, unmarried, and living alone—household characteristics associated with **limited access to informal caregiving** as care needs increase. They are also more likely to report fair or poor health, suggesting **greater potential need for LTSS over time**.

In addition, the Overlooked Middle has fewer economic buffers. They are less likely to have completed a college degree, more likely to be retired, and less likely to own their homes. Consistent with these patterns, they report lower levels of assets overall, reducing their ability to absorb unexpected health or LTSS care-related expenses. Together, these characteristics distinguish the Overlooked Middle as a population at **heightened risk of unmet LTSS needs as they age**—despite having incomes above Medicaid eligibility thresholds.

Survey Findings: Confidence with Paying for LTSS

Overall, nearly **6 in 10** respondents are **NOT** confident that they will have the resources to pay for LTSS, if needed. Income and assets are the major drivers of confidence; 56% of those with higher incomes and 62% of those with higher assets feel confident that they could afford LTSS costs.



Nearly three-quarters of respondents in the Overlooked Middle are not confident in their ability to pay for LTSS. Respondents with fewer household assets lack confidence in their ability to pay for LTSS (83% of respondents with less than $250k in assets compared to 38% with more assets).

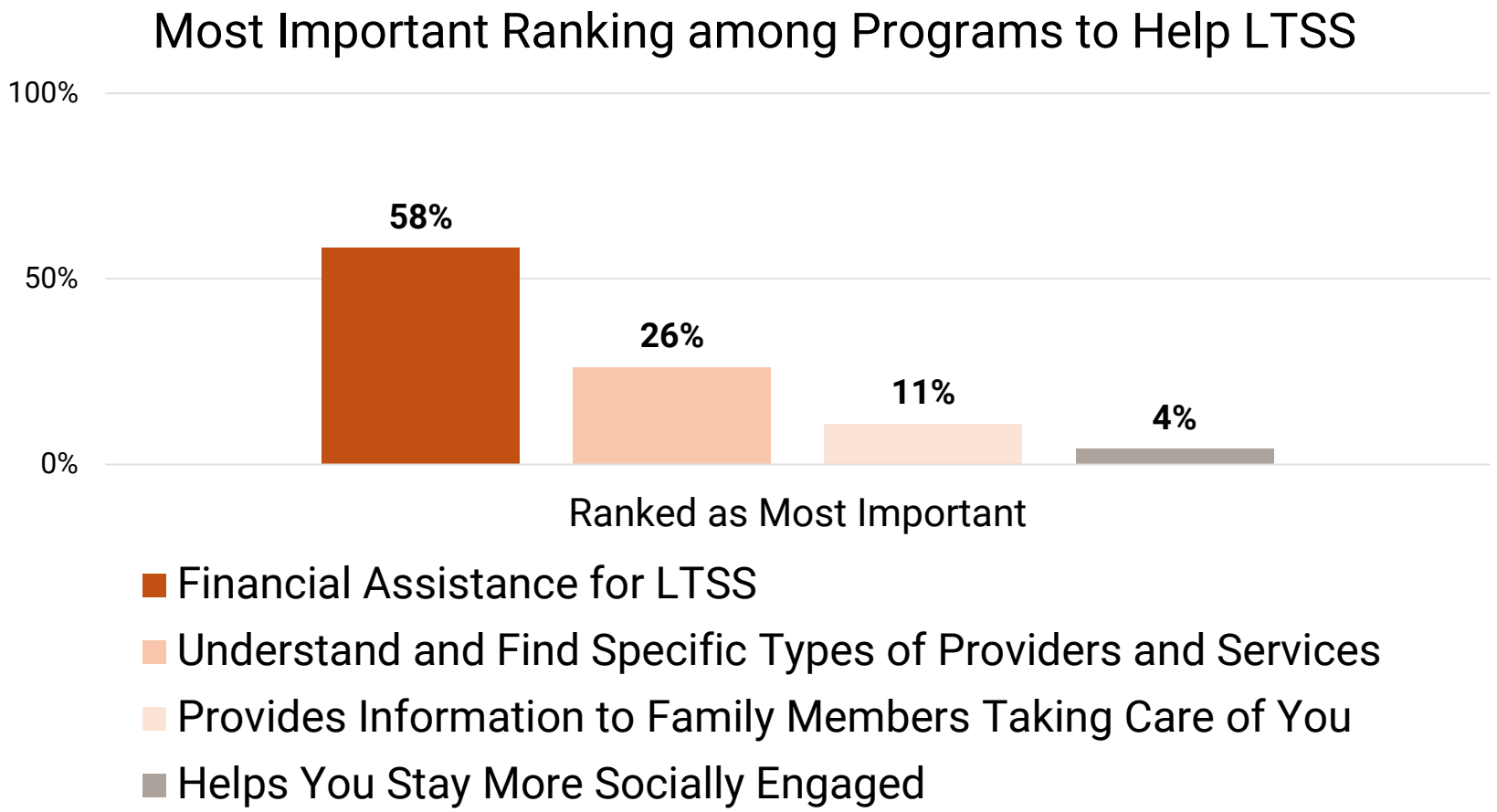
Homeownership appears to also align with confidence; 46% of homeowner respondents feel confident that they can afford LTSS costs compared to 22% of non-homeowners.

Respondents who indicate they lack confidence in their ability to pay are younger, female, Hispanic, have less than a college degree, are not married, not retired, in fair/poor health and do not understand their own risk for LTSS needs or understand who pays for LTSS.

SOURCE: AmeriSpeak (2026). Q10. Suppose you needed help with daily personal care such as bathing, dressing, or using the toilet for at least 2 years, which could cost about $110,000. How confident are you that you would have the resources to pay for that care?

Survey Findings: Priorities Among Programs to Help with Finding or Learning About LTSS

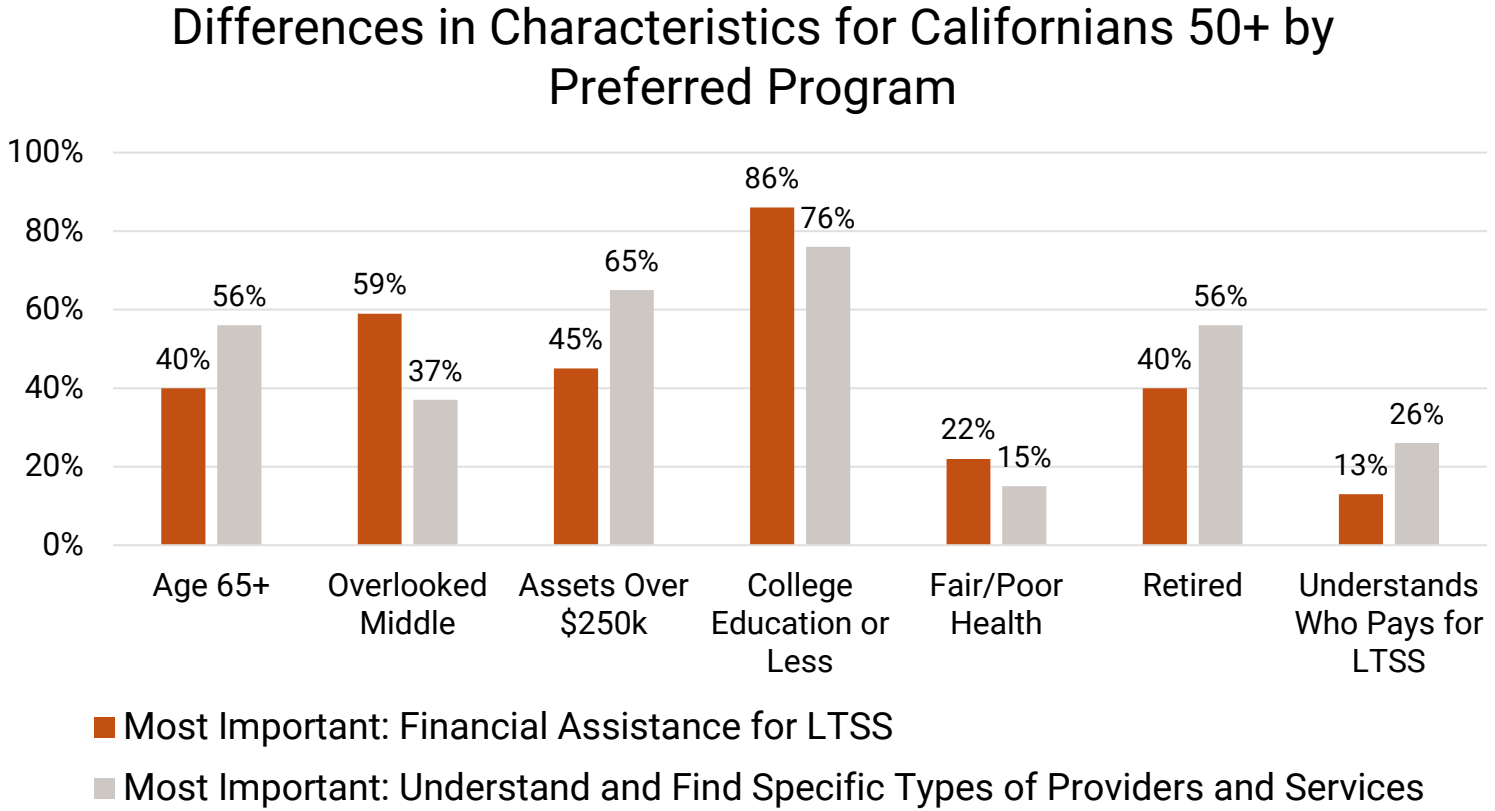
Nearly **6 in 10** respondents indicate that a program offering financial assistance for home- or community-based LTSS is most important to them.



While programs that offer financial assistance to pay for LTSS is most important for the largest proportion of respondents, just over one-quarter (26%) of respondents indicate that getting support to understand and find LTSS providers or services is most important to them. Very few feel that caregiver supports or programs to support social engagement are their top priority if they need LTSS in the future.

SOURCE: AmeriSpeak (2026). Q9. People have different opinions about the types of programs to help individuals and their families pay for, find, or learn about long term care. Thinking about a time when you might need care, please rank these different types of programs in order from most important to least important to you.

Respondents prioritize programs offering financial assistance for LTSS as well as programs that help consumers understand and find LTSS providers and services. The characteristics of these two groups are very different.



Respondents who prefer programs offering financial assistance are younger, with lower income and fewer household assets, lower educational attainment, in fair or poor health, still working, and do not understand who pays for LTSS.

Respondents who prefer programs that help with understanding and finding LTSS providers and services are older, with higher income and assets, better educated, in better health, retired, and understand who pays for LTSS.

SOURCE: AmeriSpeak (2026). Q9. People have different opinions about the types of programs to help individuals and their families pay for, find, or learn about long term care. Thinking about a time when you might need care, please rank these different types of programs in order from most important to least important to you.

Survey Findings: Program Preferences for Paying for LTSS

A majority of respondents say that options for financial support to cover the costs of LTSS would be helpful; nearly all respondents said expanding Medicare to cover LTSS would be helpful. When asked to select a single top choice, 68% of all respondents say expanding Medicare is most important; 14% prioritize accessing Medi-Cal to cover LTSS needs. Perspectives of the Overlooked Middle are similar.

If you needed help paying for long term care, how helpful would each of the following programs be to you?	% Helpful (Full Survey)	% Most Important (Full Survey)	% Most Important (Overlooked Middle)
Expand Medicare to cover long term care costs in the home for daily living help	**95%**	**68%**	**66%**
Being able to access the current Medi-Cal program	80%	14%	16%
Provide workplace benefits for long term care similar to health insurance or retirement savings, to help workers pay for their own or their family's care	75%	10%	10%
Classes, workshops, or one-on-one counseling to help people plan for care, manage money, and protect against frauds and scams	74%	4%	4%
A voluntary state-facilitated retirement savings program that would allow people to save money for future care	70%	4%	5%

SOURCE: AmeriSpeak (2026). Q11. If you needed help paying for long term care, how helpful would each of the following programs be to you?

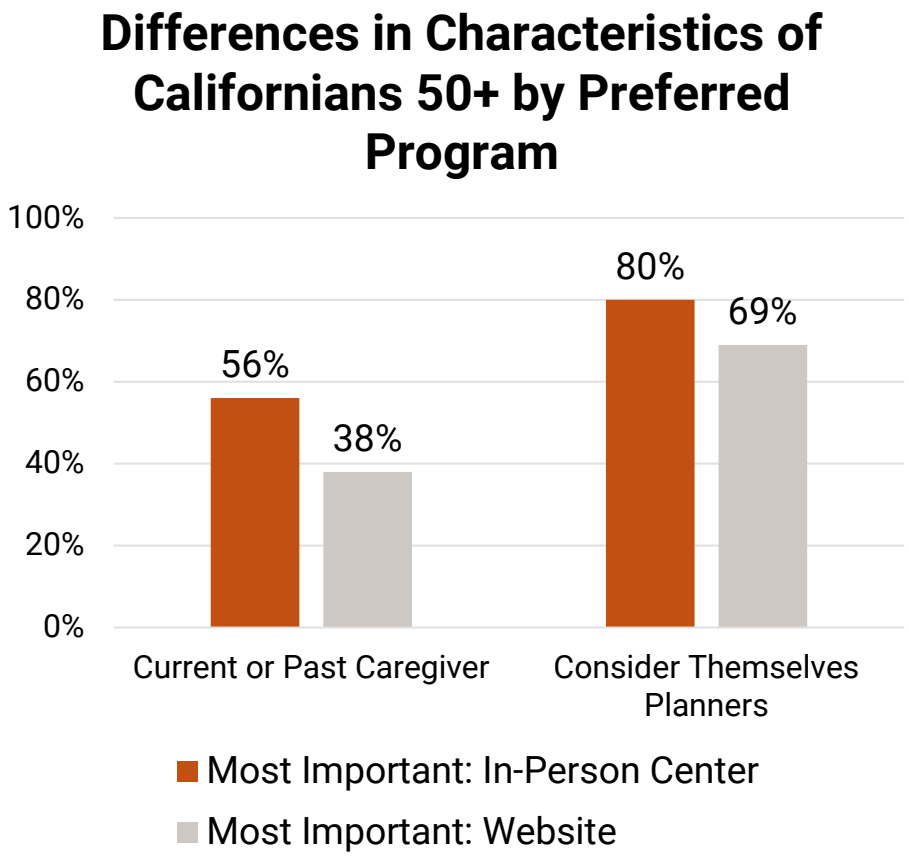
Survey Findings: Program Preferences for LTSS Resources

All states offer programs that provide information about LTSS options. Survey respondents find the options for informational programs important, with strongest support for a web-based resource for LTSS programs, services, and providers. When asked to select their top choice, 43% of respondents prioritize in-person options for getting support to understand LTSS options.

How interested would you be in each of the following services?	% Interested	% Most Important
A free, easy-to-use, website with up-to-date information about local programs, services, and care providers, costs, and tips for choosing care	**90%**	35%
A toll-free phone help line where you can talk to a trained professional to answer questions, help you find and connect with the services you need	84%	15%
An in-person resource center (such as senior centers, libraries, or local aging offices) where you and/or your family can meet face-to-face with trained staff in person	83%	**43%**
A website or phone-based automated tool (Artificial Intelligence based) available to answer questions, suggest resources, and help connect to local programs, services, and care providers	61%	6%

SOURCE: AmeriSpeak (2026). Q15. States offer various types of programs to help individuals and their families make long term care choices. Thinking about a time when you might need long term care, please indicate how interested you would be in each of the following services?

Respondent preferences for getting support with making decisions around LTSS and finding LTSS services and providers are split between in-person and virtual support.



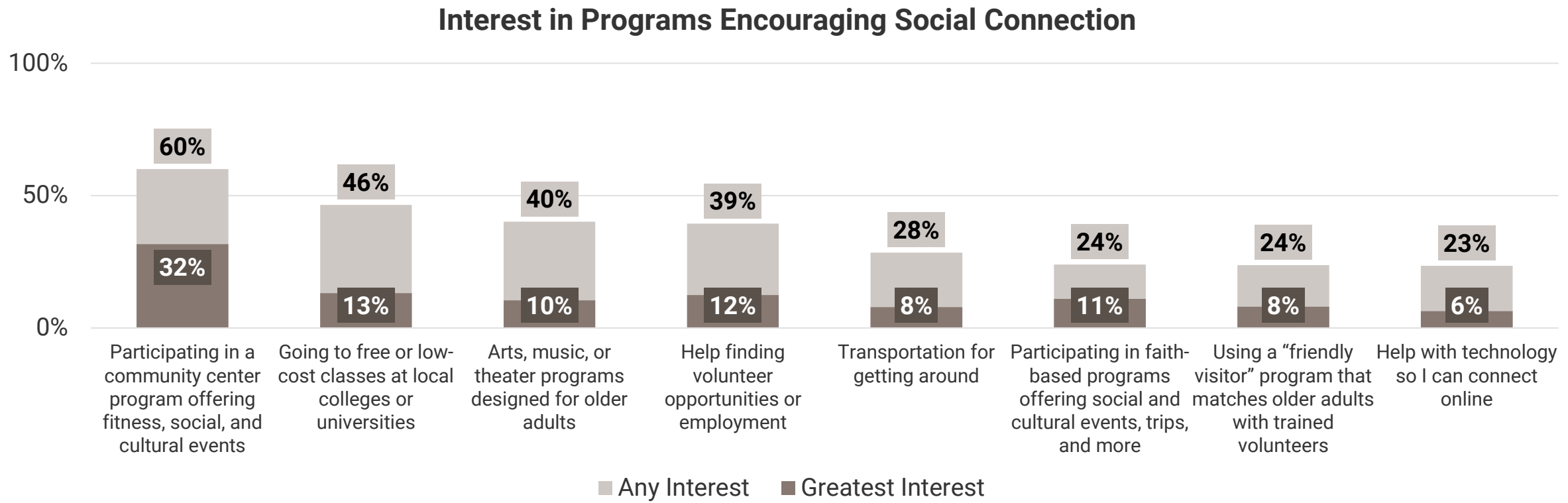
About 4 in 10 respondents prefer to have a physical location where they can go and speak to someone who can help them make decisions around LTSS and find LTSS services and providers. Just over a third (35%) prefer an easy-to-use website to support their LTSS decision-making and for finding services.

The respondents who prefer in-person resources and those who prefer a website do not differ on demographics (age, sex, race/ethnicity, language spoken), income/assets, education, marital status, retirement status, or health status. Where they do differ is on caregiver status and whether they have already made steps to plan financially for their future or not. Planners are defined as those who have invested in a 401(k), IRAs, annuities, life insurance, or long-term care insurance. Those who prefer an in-person center to support them are more likely to be current or prior caregivers and more likely to consider themselves planners.

SOURCE: AmeriSpeak (2026). Q15. States offer various types of programs to help individuals and their families make long term care choices. Thinking about a time when you might need long term care, please indicate how interested you would be in each of the following services?

Survey Findings: Program Preferences to Address Social Isolation

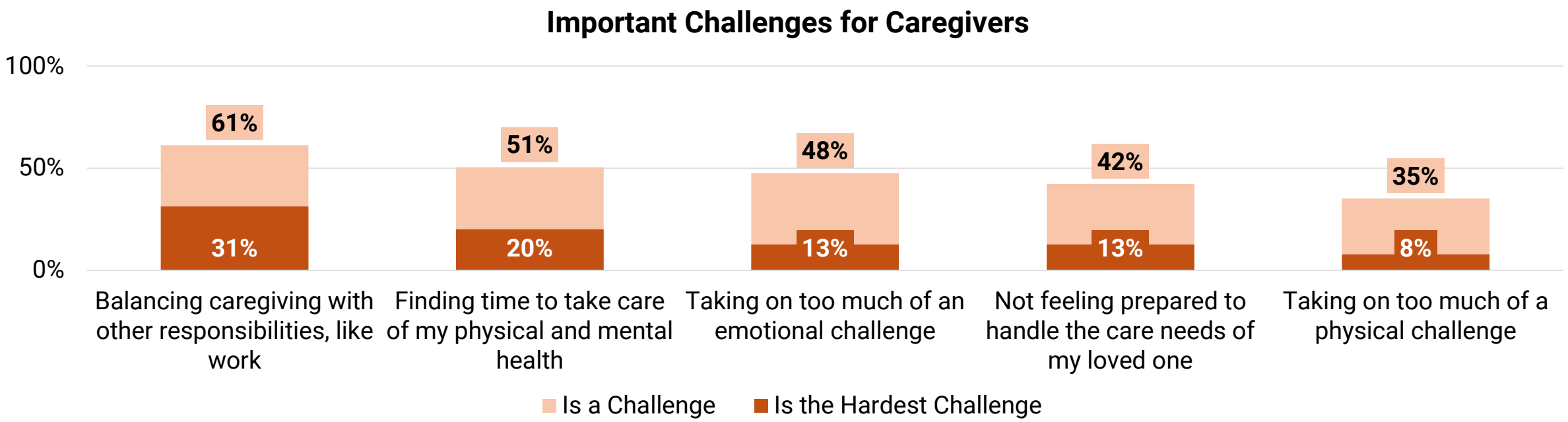
Two-thirds (66%) of respondents are interested in having more opportunities to increase their social connectivity. The largest share of respondents showed interest in attending community center fitness, social, and cultural programs and named this their greatest interest.



SOURCE: AmeriSpeak (2026). Q18. How interested would you be in having more opportunities to communicate and/or meet up with others in your community, such as seeing friends more often, meeting new people, getting out more often, or participating in structured social events, clubs, or programs? Q19. Would you be interested in any of the following programs intended to help people feel socially connected with their community? Q20: Which of these programs is of greatest interest to you?

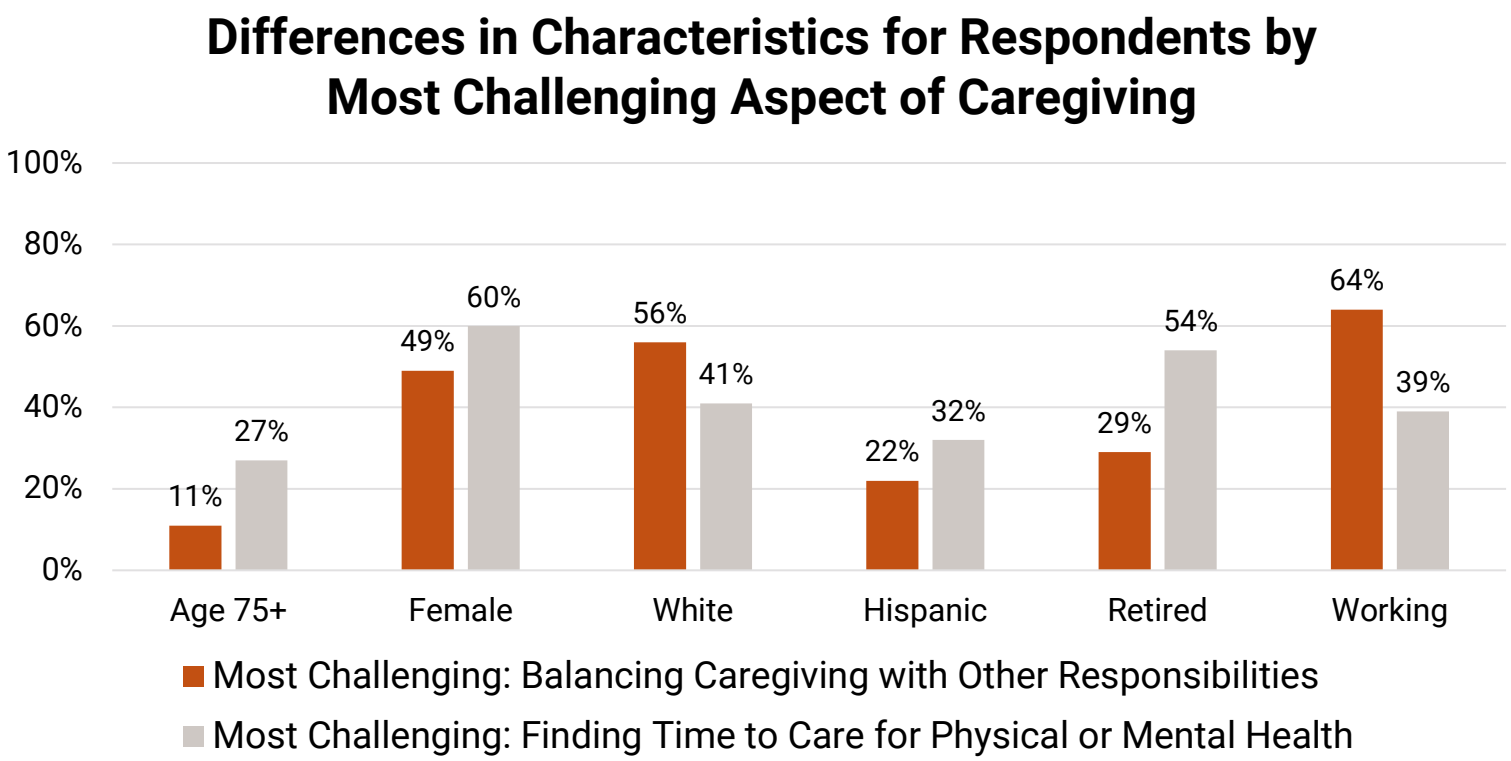
Survey Findings: Caregiver Concerns and Preferences for Support

Half (50%) of respondents are current or previous caregivers. The largest share of caregivers say that balancing caregiving with other responsibilities is a challenge (61%) followed by taking care of their own health needs (51%). When asked to select a single top challenge, 31% identify balancing caregiving with other responsibilities is the greatest challenge.



SOURCE: AmeriSpeak (2026). Q22. Some caregivers report challenges to their health and well-being, and/or to work, and family life. Which of the following aspects of being a family caregiver do you see as an important challenge?

The most frequently-cited challenge among respondents who are current or former caregivers is balancing caregiving with other responsibilities, followed by taking time to care of one's physical and mental health.



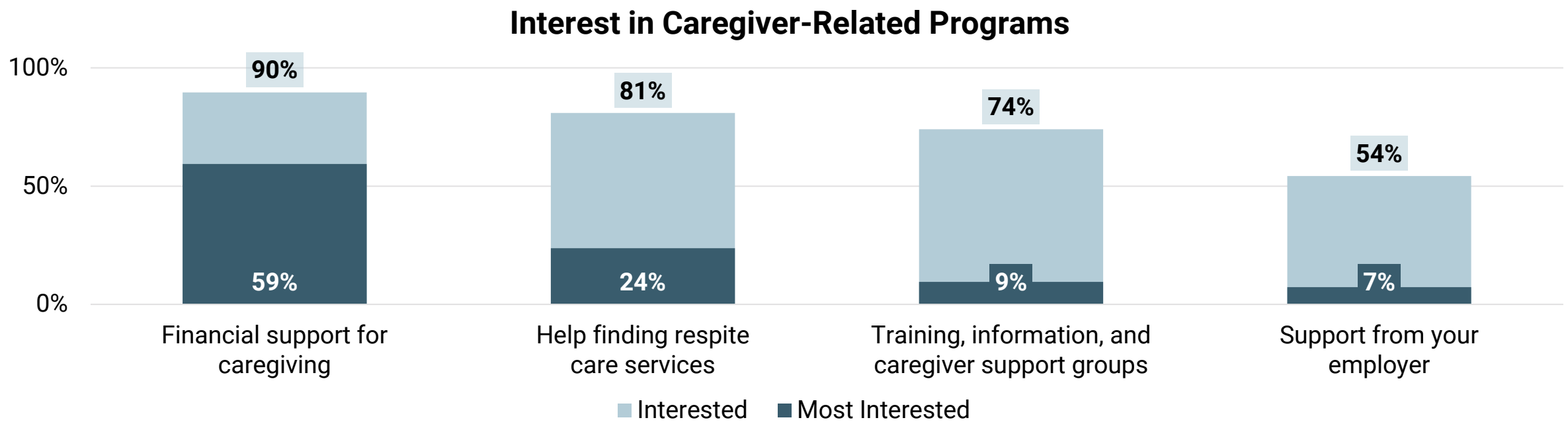
Caregiver respondents who said balancing caregiving with other responsibilities is their most important challenge are more likely to be younger, male, white, and still working.

Respondents who say finding time to take care of their physical or mental health is the most important challenge are more likely to be older, female, Hispanic, and retired.

Income and assets are not associated with the most significant challenges facing caregiver respondents.

SOURCE: AmeriSpeak (2026). Q22. Some caregivers report challenges to their health and well-being, and/or to work, and family life. Which of the following aspects of being a family caregiver do you see as an important challenge? Q23: Which of the following do you see as MOST challenging?

Interest in caregiver-related programs was high among current and previous caregiver respondents. Most of these respondents indicate interest in receiving financial support for caregiving (90%), followed by getting help finding respite care services (81%). When asked to select a single top program, 59% say financial support is their priority.

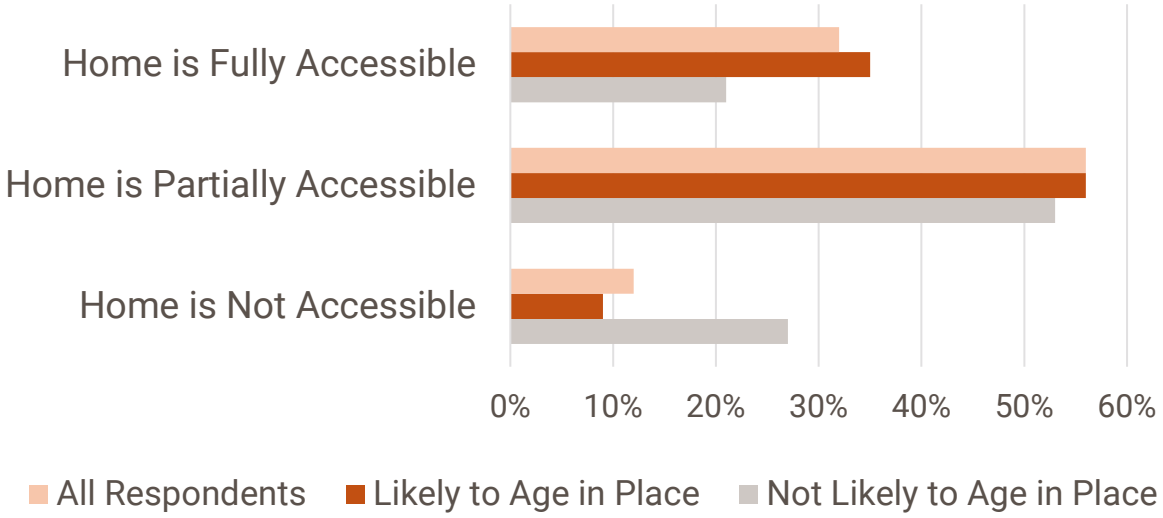


SOURCE: AmeriSpeak (2026). Q24. Thinking about yourself as a caregiver, or thinking about your loved ones who might be helping to care for you at some point, how interested would you be in each of the following programs?

Survey Findings: Aging in Place

Nearly 81% of respondents say that are likely or very likely to remain in their current home as they age. The most important home features for safely aging in place include living in a single-story home with a zero-step entry, at least a half-bath on the main floor, and wide enough doorways and hallways to navigate with adaptive equipment (if needed).[5]

Self-Reported Home Accessibility



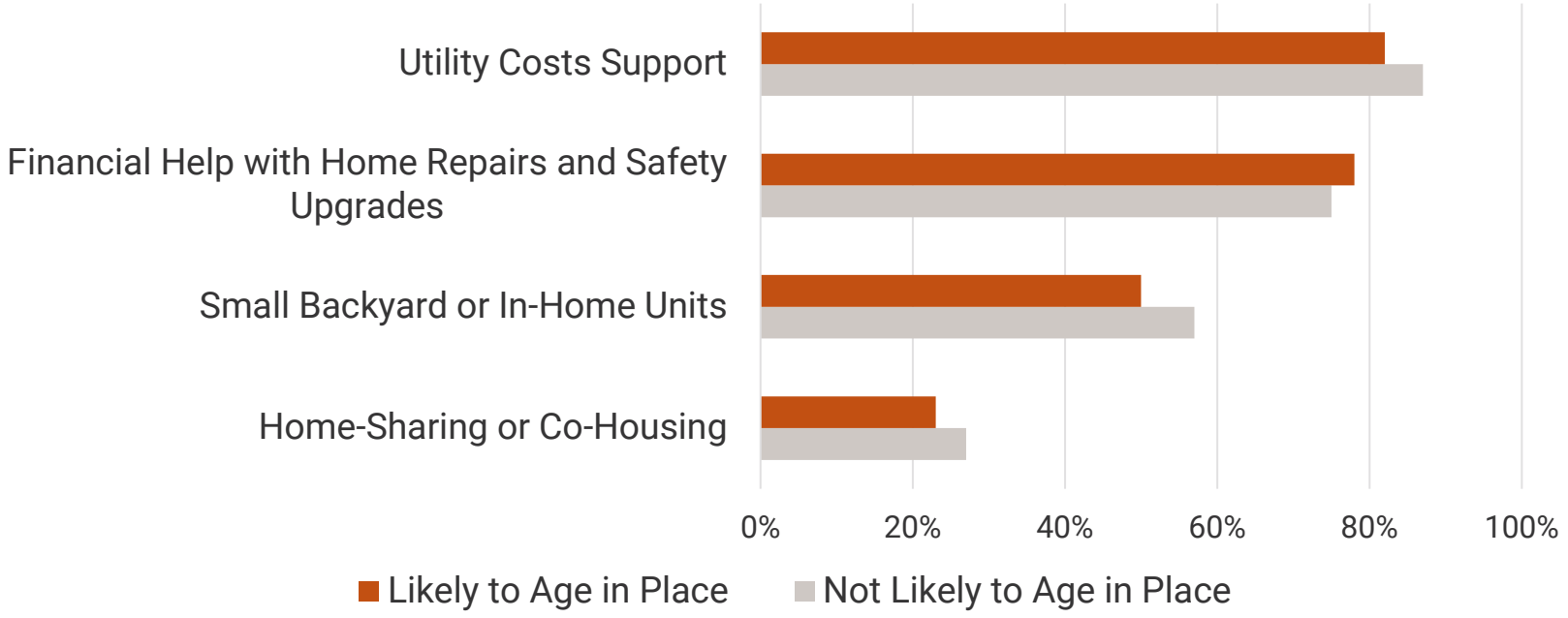
Respondents were asked whether their homes included accessibility features needed to age safely including a home with no steps leading to the entry, a bedroom and full bath on the entry level, and doorways or hallways wide enough for a walker or wheelchair. Partially accessible homes include some, but not all, of these features, while homes are considered not accessible if they include none of these features.

Respondents who plan to age in place are more likely to live in fully accessible homes, though most live in homes that are only partially accessible. Nearly 10% of those planning to age in place live in homes that lack all key accessibility features.

SOURCE: AmeriSpeak (2026). Q4. Does your current home have any of the following features that are typically needed to support someone to live safely in their home as they grow older? Q5. How likely is it that you will remain in your current home as you age?

Most respondents (81%) report that they are likely to age in place. When asked about programs to support aging in place, most respondents prefer financial support for utility costs and for home repairs/safety upgrades.

Interest in Programs that Benefit the Safety and Suitability of Your Home by Plans to Age in Place

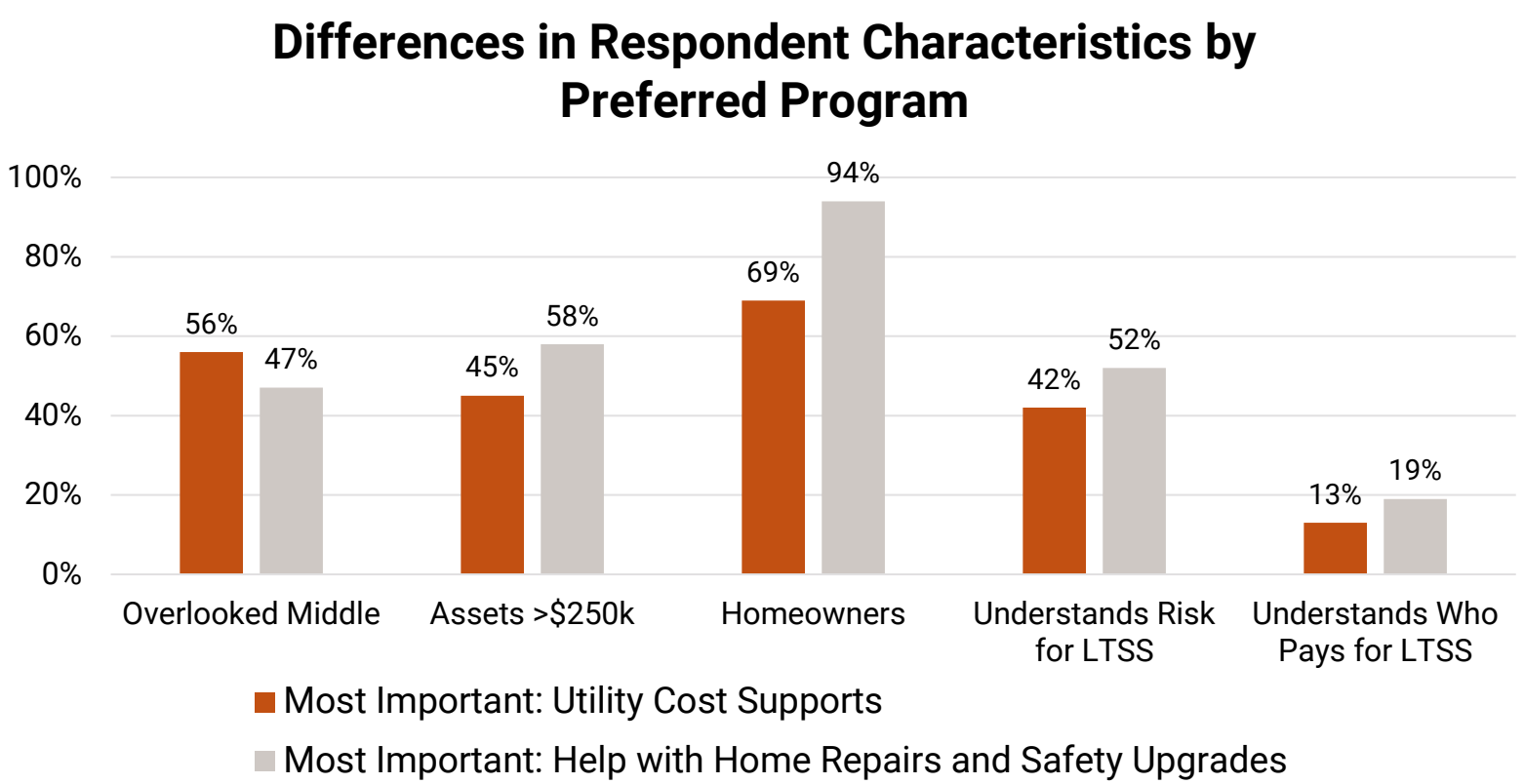


When asked to identify which program option was most important, respondents were evenly split between utility cost support and financial help for home repairs and safety upgrades at 38% each.

Program preferences did not vary substantially by plans to age in place.

SOURCE: AmeriSpeak (2026). Q26. How interested would you be in the following programs or services to help ensure your home is a safe and suitable place for you to remain in as you age?

Utility cost supports and financial help with home repairs and safety upgrades are the most highly preferred program options among respondents. The characteristics of respondents are different based on their program priority.



Respondents whose preference is for a program that provides utility cost supports are more likely to be members of the Overlooked Middle and less likely to have high-value assets, be homeowners, understand their own risk for LTSS, or understand who pays for LTSS.

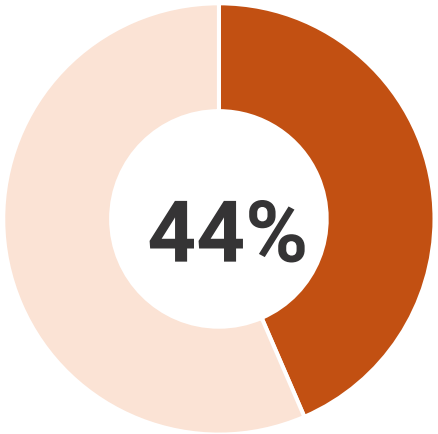
Conversely, respondents who prefer help with home repairs and safety upgrades have higher incomes/assets, are more likely to be homeowners, and understand their risk for LTSS and who pays.

SOURCE: AmeriSpeak (2026). Q26. How interested would you be in the following programs or services to help ensure your home is a safe and suitable place for you to remain in as you age?

Survey Findings: Program Preferences for Homeowners

Over three-quarters of respondents are homeowners (77%). Of them, 2 in 5 report having tapped into home equity to pay for other expenses in the past. As noted below, 44% of homeowners are interested in learning about using home equity to pay for LTSS.

Proportion of Respondents Who are Homeowners Interested in Learning About Using Home Equity to Pay for LTSS

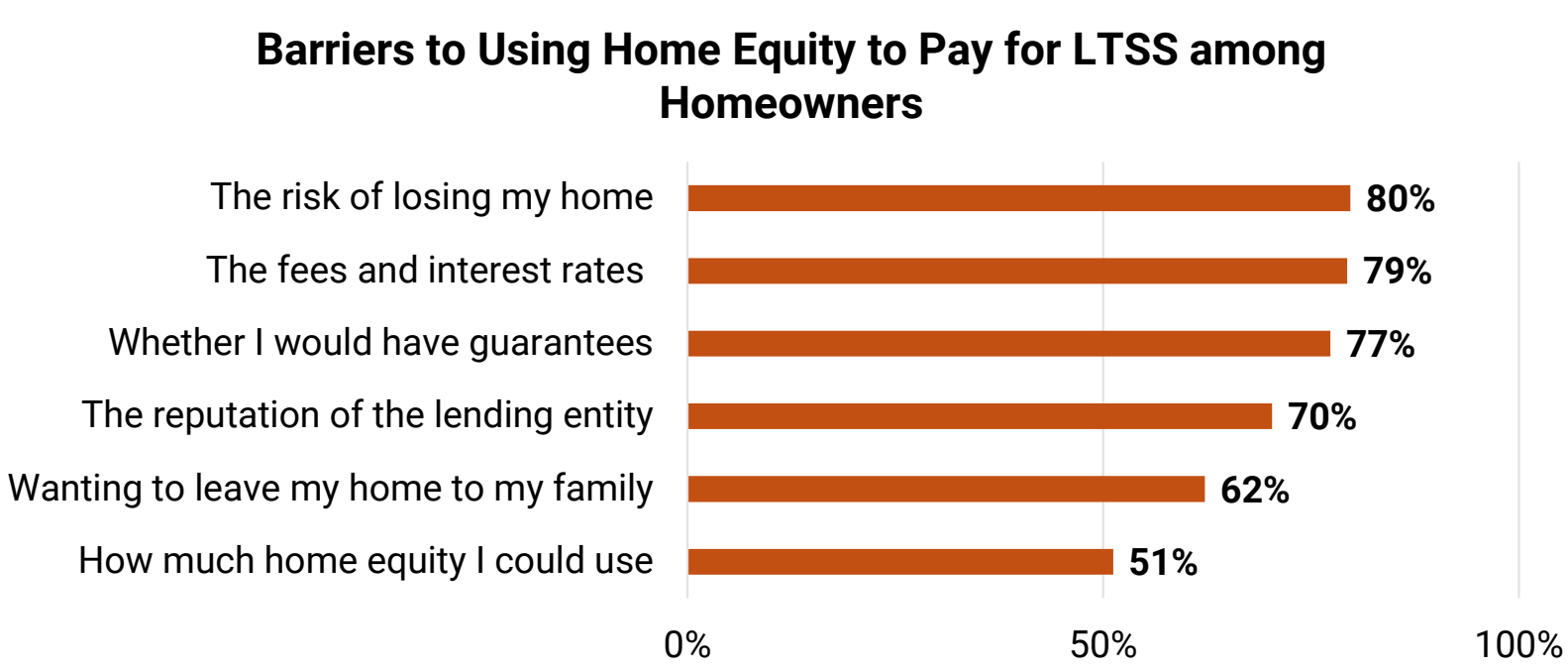


Among respondents who are homeowners, 44% indicate interest in learning more about ways to tap into home equity to cover LTSS costs.

Those who have previously accessed home equity for other expenses are more likely to be interested in learning more about this option for LTSS. Those who indicate interest are more likely to be younger, Black or Hispanic, in fair/poor health, not married, and have fewer assets.

SOURCE: AmeriSpeak (2026). Q28. We'd like to know whether you have ever used the equity in your home to generate cash you can use for other things. Have you ever taken out a second mortgage on your home, refinanced your home to obtain additional cash, or used a Reverse Mortgage, Home Equity Line of Credit (HELOC), or Home Equity Loan? Q29. How interested would you be in learning more about ways to remain in your current home while also using some of the equity value in your home to help pay for long term services and supports, if and when you need them?

Among respondents who are homeowners, the most frequently selected barriers to using home equity to pay for LTSS include the risk of losing the home, the fees and interest rates, and the lack of guarantees.



Homeowners with prior experience using home equity for other expenses are more likely to identify barriers to using home equity.

Respondents in the Overlooked Middle are also more likely to identify these issues as barriers with the exception of whether they will have guarantees with the program and the reputation of the lending entity.

SOURCE: AmeriSpeak (2026). Q30. People often have questions or concerns before deciding whether to use home equity to help cover future long term care costs. For each of the following, please indicate how significant a barrier it would be for you when considering using your home equity to pay for care.

Appendix

The California LTSS Survey

The California LTSS Survey reflects the responses of a representative sample of California residents age 50 and older who are part of the **AmeriSpeak® Panel**. AmeriSpeak is a large-scale, probability-based, scientifically rigorous panel of U.S. households recruited using random sampling methods to ensure broad representation across demographics.[6]

The survey, designed in collaboration with the **LeadingAge LTSS Center @Umass Boston**, asked respondents to share their thoughts about programs and services that can help them find services and providers or cover their costs.

Data reported in this Chartbook were collected via a web-based survey, with option for phone administration, between December 1, 2025 and January 6, 2026. Survey respondents are adults age 50 and older living in California with household incomes at or above 139% of the FPL.

Sample and Response Metrics

- Invited Panelists: 4,126
- Completed Surveys: 1,305 (1,281 by web mode and 24 by phone)
- Survey Completion Rate: 33.2%
- Interview Completion Rate: 96.4%
- Observed Eligibility Rate: 95.2%
- Expected Eligibility Rate: 85.0%
- Margin of Error: ±3.8 percentage points
- Median Survey Duration: 16 minutes

Recruitment and Fielding Procedures

Panelists were invited via email, SMS (for those who opted in), and through secure web portals or mobile apps. NORC initiated a soft launch on December 1, 2025, followed by full deployment on December 4, 2025. Data collection ended on January 6, 2026. Reminder messages were sent on three days after the initial invitation email and then every five days thereafter with the final reminder sent on January 5, 2026. Phone interviews were conducted from December 4-December 23, 2025.

Respondents received a modest incentive for completing the survey. To ensure data quality, NORC applied rigorous cleaning protocols, removing 11 cases for issues such as speeding, high refusal rates, straight-lining, and income data mismatches.

Panel Integrity and Data Security

AmeriSpeak and Amplify AAPI panels are secure, invitation-only platforms. Respondents are uniquely identified and cannot participate more than once. The panels are protected against bots and fraudulent responses.

Weighting and Representativeness

Final survey weights were developed through a multi-step process involving panel weights, study-specific base weights, and nonresponse adjustments. Raking procedures aligned the sample to demographic benchmarks from the American Community Survey (ACS). Weights were trimmed and re-raked to minimize variance and ensure representativeness.

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