

HB2862



96TH GENERAL ASSEMBLY

State of Illinois

2009 and 2010

HB2862

Introduced 2/24/2009, by Rep. Tom Cross

SYNOPSIS AS INTRODUCED:

215 ILCS 132/10

Amends the Illinois Long-Term Care Partnership Program Act. Makes a technical change in a Section concerning definitions.

LRB096 07472 RPM 17565 b

A BILL FOR

1 AN ACT concerning regulation.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 5. The Illinois Long-Term Care Partnership Program
5 Act is amended by changing Section 10 as follows:

6 (215 ILCS 132/10)

7 Sec. 10. Definitions. As used in this Act:

8 "Agency" means the ~~the~~ Department of Healthcare and Family
9 Services.

10 "Asset disregard" means, with respect to qualification for
11 State Medicaid benefits, the disregard of any assets or
12 resources in an amount equal to the insurance benefit payments
13 that are made to or on the behalf of an individual who is a
14 beneficiary under a qualified long-term care insurance
15 partnership policy.

16 "Department" means the Department of Financial and
17 Professional Regulation.

18 "Medicaid" means the federal medical assistance program
19 established under Title XIX of the Social Security Act.

20 "Qualified long-term care insurance partnership policy"
21 means a policy that meets all of the following requirements:

22 (1) it covers an insured who was a resident of Illinois
23 when coverage first became effective under the policy;

1 (2) it is a qualified long-term care insurance policy
2 as defined in Section 7702B(b) of the Internal Revenue Code
3 of 1986 issued not earlier than the effective date of the
4 State plan amendment;

5 (3) it meets the model regulations and requirements of
6 the National Association of Insurance Commissioners model
7 specified in paragraph (5) of Title VI, Section 6021 of the
8 federal Deficit Reduction Act of 2005, and the Director of
9 the Division of Insurance of the Department certifies it as
10 meeting these requirements; and

11 (4) if the policy is sold to an individual who:

12 (A) has not attained age 61 as of the date of
13 purchase, the policy provides compound annual
14 inflation protection;

15 (B) has attained age 61 but has not attained age 76
16 as of such date, the policy provides some level of
17 inflation protection; or

18 (C) has attained age 76 as of such date, the policy
19 may, but is not required to, provide some level of
20 inflation protection.

21 "State plan amendment" means a State Medicaid plan
22 amendment made to the federal Department of Health and Human
23 Services that provides for the disregard of any assets or
24 resources in an amount equal to the insurance benefit payments
25 that are made to or on the behalf of an individual who is a
26 beneficiary under a qualified long-term care insurance

1 partnership policy.

2 (Source: P.A. 95-200, eff. 8-16-07.)