

96TH GENERAL ASSEMBLY State of Illinois 2009 and 2010 SB0687

Introduced 2/6/2009, by Sen. John J. Cullerton

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 06751 RPM 16835 b

1 AN ACT concerning regulation.

Be it enacted by the People of the State of Illinois, 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 $\underline{\text{the}}$ Department of Healthcare and Family
- 9 Services.
- "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
- when coverage first became effective under the policy;

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

- (3) it meets the model regulations and requirements of the National Association of Insurance Commissioners model specified in paragraph (5) of Title VI, Section 6021 of the federal Deficit Reduction Act of 2005, and the Director of the Division of Insurance of the Department certifies it as meeting these requirements; and
 - (4) if the policy is sold to an individual who:
 - (A) has not attained age 61 as of the date of purchase, the policy provides compound annual inflation protection;
 - (B) has attained age 61 but has not attained age 76 as of such date, the policy provides some level of inflation protection; or
 - (C) has attained age 76 as of such date, the policy may, but is not required to, provide some level of inflation protection.

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

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