SUBSTITUTE FOR HOUSE BILL NO. 6478

A bill to amend 1939 PA 280, entitled "The social welfare act,"

by amending sections 112b, 112c, and 112e (MCL 400.112b, 400.112c, and 400.112e), as added by 1995 PA 85; and to repeal acts and parts of acts.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

- 1 Sec. 112b. As used in this section and sections 112c to 112e:
- 2 (a) "Home health care" means care described in section 109c.
- 3 (A) "ASSET DISREGARD" MEANS, WITH REGARD TO THE STATE'S
- 4 MEDICAL ASSISTANCE PROGRAM, DISREGARDING ANY ASSETS OR RESOURCES IN
- 5 AN AMOUNT EQUAL TO THE INSURANCE BENEFIT PAYMENTS THAT ARE MADE TO
- 6 OR ON BEHALF OF AN INDIVIDUAL WHO IS A BENEFICIARY UNDER A
- 7 QUALIFIED LONG-TERM CARE INSURANCE PARTNERSHIP POLICY.

- 1 (b) "Long-term care insurance policy" means a policy described
- 2 in chapter 39 of the insurance code of 1956, -Act No. 218 of the
- 3 Public Acts of 1956, being sections 500.3901 to 500.3955 of the
- 4 Michigan Compiled Laws 1956 PA 218, MCL 500.3901 TO 500.3955.
- 5 (C) "LONG-TERM CARE PARTNERSHIP PROGRAM" MEANS A QUALIFIED
- 6 STATE LONG-TERM CARE INSURANCE PARTNERSHIP AS DEFINED IN SECTION
- 7 1917 (B) OF THE SOCIAL SECURITY ACT, 42 USC 1396P.
- 8 (D) "LONG-TERM CARE PARTNERSHIP PROGRAM POLICY" MEANS A
- 9 QUALIFIED LONG-TERM CARE INSURANCE POLICY THAT THE COMMISSIONER OF
- 10 THE OFFICE OF FINANCIAL AND INSURANCE SERVICES CERTIFIES AS MEETING
- 11 THE REQUIREMENTS OF SECTION 1917(B) OF THE SOCIAL SECURITY ACT, 42
- 12 USC 1396P, SECTION 6021 OF THE FEDERAL DEFICIT REDUCTION ACT OF
- 13 2005, PUBLIC LAW 109-171, AND ANY APPLICABLE FEDERAL REGULATIONS OR
- 14 GUIDELINES.
- 15 (E) -(c) "Medicaid" means the program of medical assistance
- 16 established by the department OF COMMUNITY HEALTH under section
- **17** 105.
- 18 (d) "Nursing home care" means nursing home services as
- 19 described in section 109(1)(c).
- 20 (e) "Partnership policy" means a long-term care insurance
- 21 policy that meets the requirements set forth in section 112d.
- 22 (f) "Partnership program" means the Michigan partnership for
- 23 long-term care program established under section 112c.
- Sec. 112c. (1) Subject to subsection -(4) (5), the department
- 25 OF COMMUNITY HEALTH IN CONJUNCTION WITH THE OFFICE OF FINANCIAL AND
- 26 INSURANCE SERVICES AND THE DEPARTMENT OF HUMAN SERVICES shall
- 27 establish the Michigan partnership for long-term care program A

- 1 LONG-TERM CARE PARTNERSHIP PROGRAM IN MICHIGAN to provide for the
- 2 financing of long-term care through a combination of private
- 3 insurance and medicaid. IT IS THE INTENT OF THE LONG-TERM CARE
- 4 PARTNERSHIP PROGRAM TO DO ALL OF THE FOLLOWING:
- 5 (A) PROVIDE INCENTIVES FOR INDIVIDUALS TO INSURE AGAINST THE
- 6 COSTS OF PROVIDING FOR THEIR LONG-TERM CARE NEEDS.
- 7 (B) PROVIDE A MECHANISM FOR INDIVIDUALS TO QUALIFY FOR
- 8 COVERAGE OF THE COST OF THEIR LONG-TERM CARE NEEDS UNDER MEDICAID
- 9 WITHOUT FIRST BEING REQUIRED TO SUBSTANTIALLY EXHAUST THEIR
- 10 RESOURCES.
- 11 (C) ALLEVIATE THE FINANCIAL BURDEN ON THE STATE'S MEDICAL
- 12 ASSISTANCE PROGRAM BY ENCOURAGING THE PURSUIT OF PRIVATE
- 13 INITIATIVES.
- 14 (2) An individual is eligible to participate in the
- 15 partnership program if he or she meets all of the following
- 16 requirements:
- 17 (a) Is a Michigan resident.
- 18 (b) Purchases a partnership policy that is delivered, issued
- 19 for delivery, or renewed on or after the effective date of this
- 20 section, and maintains the partnership policy in effect throughout
- 21 the period of participation in the partnership program.
- 22 (c) Exhausts the minimum benefits under the partnership policy
- 23 as described in section 112d(1)(a). Benefits received under a long-
- 24 term care insurance policy before the effective date of this
- 25 section do not count toward the exhaustion of benefits required in
- 26 this subdivision.
- 27 (3) Upon application of an individual who meets the

- 1 requirements described in subsection (2), the department shall
- 2 determine the individual's eligibility for medicaid in accordance
- 3 with both of the following:
- 4 (a) After disregarding financial assets exempted under
- 5 medicaid eligibility requirements, the department shall disregard
- 6 an additional amount of financial assets equal to the dollar amount
- 7 of coverage under the partnership policy.
- 8 (b) The department shall consider the individual's income in
- 9 accordance with medicaid eligibility requirements.
- 10 (4) The department shall seek appropriate amendments to the
- 11 medicaid state plan and shall apply for any necessary waiver of
- 12 medicaid requirements by the federal health care financing
- 13 administration to implement the partnership program.
- 14 (5) The department shall not implement the partnership program
- 15 unless both of the following apply:
- 16 (a) A federal waiver of medicaid requirements is obtained, if
- 17 necessary.
- 18 (b) Federal law exempts individuals who receive medicaid under
- 19 this section from estate recovery requirements under section 1917
- 20 of title XIX of the social security act, 42 U.S.C. 1396p.
- 21 (2) AN INDIVIDUAL WHO IS A BENEFICIARY OF A MICHIGAN LONG-TERM
- 22 CARE PARTNERSHIP PROGRAM POLICY IS ELIGIBLE FOR ASSISTANCE UNDER
- 23 THE STATE'S MEDICAL ASSISTANCE PROGRAM USING THE ASSET DISREGARD AS
- 24 PROVIDED UNDER SUBSECTION (5).
- 25 (3) THE DEPARTMENT OF COMMUNITY HEALTH SHALL PURSUE RECIPROCAL
- 26 AGREEMENTS WITH OTHER STATES TO EXTEND THE ASSET DISREGARD TO
- 27 MICHIGAN RESIDENTS WHO PURCHASED LONG-TERM CARE PARTNERSHIP

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- 1 POLICIES IN OTHER STATES THAT ARE COMPLIANT WITH TITLE VI, SECTION
- 2 6021 OF THE FEDERAL DEFICIT REDUCTION ACT OF 2005, PUBLIC LAW 109-
- 3 171, AND ANY APPLICABLE FEDERAL REGULATIONS OR GUIDELINES.
- 4 (4) UPON DIMINISHMENT OF ASSETS BELOW THE ANTICIPATED
- 5 REMAINING BENEFITS UNDER A LONG-TERM CARE PARTNERSHIP PROGRAM
- 6 POLICY, CERTAIN ASSETS OF AN INDIVIDUAL, AS PROVIDED UNDER
- 7 SUBSECTION (5), SHALL NOT BE CONSIDERED WHEN DETERMINING ANY OF THE
- 8 FOLLOWING:
- 9 (A) MEDICAID ELIGIBILITY.
- 10 (B) THE AMOUNT OF ANY MEDICAID PAYMENT.
- 11 (C) ANY SUBSEQUENT RECOVERY BY THE STATE OF A PAYMENT FOR
- 12 MEDICAL SERVICES OR LONG-TERM CARE SERVICES.
- 13 (5) NOT LATER THAN <<270>> DAYS AFTER THE EFFECTIVE DATE OF THE
- 14 AMENDATORY ACT THAT ADDED THIS SUBSECTION, THE DEPARTMENT OF
- 15 COMMUNITY HEALTH SHALL APPLY TO THE UNITED STATES DEPARTMENT OF
- 16 HEALTH AND HUMAN SERVICES FOR AN AMENDMENT TO THE STATE'S MEDICAID
- 17 STATE PLAN TO ESTABLISH THAT THE ASSETS AN INDIVIDUAL OWNS AND MAY
- 18 RETAIN UNDER MEDICAID AND STILL QUALIFY FOR BENEFITS UNDER MEDICAID
- 19 AT THE TIME THE INDIVIDUAL APPLIES FOR BENEFITS IS INCREASED
- 20 DOLLAR-FOR-DOLLAR FOR EACH DOLLAR PAID OUT UNDER THE INDIVIDUAL'S
- 21 LONG-TERM CARE INSURANCE POLICY IF THE INDIVIDUAL IS A BENEFICIARY
- 22 OF A QUALIFIED LONG-TERM CARE PARTNERSHIP PROGRAM POLICY.
- 23 (6) IF THE LONG-TERM CARE PARTNERSHIP PROGRAM IS DISCONTINUED,
- 24 AN INDIVIDUAL WHO PURCHASED A MICHIGAN LONG-TERM CARE PARTNERSHIP
- 25 PROGRAM POLICY BEFORE THE DATE THE PROGRAM WAS DISCONTINUED SHALL
- 26 BE ELIGIBLE TO RECEIVE ASSET DISREGARD IF ALLOWED AS PROVIDED BY
- 27 TITLE VI, SECTION 6021 OF THE FEDERAL DEFICIT REDUCTION ACT OF

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- 1 2005, PUBLIC LAW 109-171.
- 2 (7) THE DEPARTMENT OF COMMUNITY HEALTH SHALL CONTRACT WITH THE
- 3 MICHIGAN MEDICARE MEDICAID ASSISTANCE PROGRAM <<OR DEPARTMENT OF COMMUNITY HEALTH DESIGNATED SINGLE POINT OF ENTRY AGENCIES, OR BOTH,>> TO PROVIDE COUNSELING
- 4 SERVICES UNDER THE MICHIGAN LONG-TERM CARE PARTNERSHIP PROGRAM.
- 5 (8) THE DEPARTMENT OF COMMUNITY HEALTH, IN CONSULTATION WITH <<THE DEPARTMENT OF HUMAN SERVICES AND>>
- 6 THE OFFICE OF FINANCIAL AND INSURANCE SERVICES, SHALL DEVELOP A
- 7 NOTICE TO CONSUMERS DETAILING IN PLAIN LANGUAGE THE PERTINENT
- 8 PROVISIONS OF QUALIFIED STATE LONG-TERM CARE INSURANCE PARTNERSHIP
- 9 POLICIES AS THEY RELATE TO MEDICAID ELIGIBILITY AND SHALL DETERMINE
- 10 THE APPROPRIATE DISTRIBUTION OF THE NOTICE. THE NOTICE SHALL BE
- 11 AVAILABLE IN A PRINTABLE FORM ON THE OFFICE OF FINANCIAL AND
- 12 INSURANCE SERVICES'S WEBSITE.
- 13 (9) THE DEPARTMENT, THE DEPARTMENT OF COMMUNITY HEALTH, AND
- 14 THE OFFICE OF FINANCIAL AND INSURANCE SERVICES SHALL POST, ON THEIR
- 15 RESPECTIVE WEBSITES, INFORMATION ON HOW TO ACCESS THE NATIONAL
- 16 CLEARINGHOUSE ESTABLISHED UNDER THE FEDERAL DEFICIT REDUCTION ACT
- 17 OF 2005, PUBLIC LAW 109-171, WHEN THE NATIONAL CLEARINGHOUSE
- 18 BECOMES AVAILABLE TO CONSUMERS.
- Sec. 112e. The department OF COMMUNITY HEALTH<<, IN CONSULTATION WITH THE DEPARTMENT OF HUMAN SERVICES AND THE OFFICE OF FINANCIAL SERVICES,>> may promulgate
- 20 rules pursuant to the administrative procedures act of 1969, -Act
- 21 No. 306 of the Public Acts of 1969, being sections 24.201 to 24.328
- 22 of the Michigan Compiled Laws 1969 PA 306, MCL 24.201 TO 24.328,
- 23 as necessary to implement the partnership program IN ACCORDANCE
- 24 WITH THE REQUIREMENTS OF SECTION 1917(B) OF THE SOCIAL SECURITY
- 25 ACT, 42 USC 1396P, SECTION 6021 OF THE FEDERAL DEFICIT REDUCTION
- 26 ACT OF 2005, PUBLIC LAW 109-171, AND APPLICABLE FEDERAL REGULATIONS
- 27 OR GUIDELINES.

- Enacting section 1. Section 112d of the social welfare act, 1
- 1939 PA 280, MCL 400.112d, is repealed. 2