By the Committee on General Government Appropriations; and Senators Fasano, Atwater and Pruitt

## 601-2382-06

1	A bill to be entitled
2	An act relating to long-term care insurance;
3	creating s. 627.94075, F.S.; requiring
4	long-term care insurance policies to provide
5	for policy incontestability after a certain
6	time; providing an exception; amending s.
7	627.9403, F.S.; specifying that certain limited
8	benefit policies are a type of long-term care
9	insurance policy; deleting an exemption from a
10	minimum time period coverage requirement for
11	certain limited benefit policies; amending s.
12	627.9404, F.S.; revising certain definitions;
13	amending s. 627.9407, F.S.; revising certain
14	restrictions on long-term care insurance
15	policies; providing additional rate structure
16	requirements for long-term care insurance
17	policies; amending s. 641.2018, F.S.;
18	correcting a cross-reference; reenacting and
19	amending s. 409.9102, F.S.; directing the
20	Agency for Health Care Administration, in
21	consultation with the Office of Insurance
22	Regulation and the Department of Children and
23	Family Services, to amend the Medicaid state
24	plan that established the Florida Long-Term
25	Care Partnership Program for purposes of
26	compliance with provisions of the Social
27	Security Act; establishing a qualified state
28	Long-Term Care Insurance Partnership Program in
29	Florida; providing duties of the program;
30	requiring consultation with the Office of
31	Insurance Regulation and the Department of

1	Children and Family Services for the creation
2	of standards for certain information; providing
3	rulemaking authority to the agency for
4	implementation of s. 409.9102, F.S.; providing
5	rulemaking authority to the department
6	regarding determination of eligibility for
7	certain services; creating s. 627.94076, F.S.;
8	providing rulemaking authority to the Financial
9	Services Commission for the implementation of a
10	qualified state Long-Term Care Insurance
11	Partnership Program in Florida; repealing ss. 1
12	and 2 of ch. 2005-252, Laws of Florida, to
13	delete conflicting provisions relating to the
14	determination of eligibility for nursing and
15	rehabilitative services and the establishment
16	of the Florida Long-Term Care Partnership
17	Program that were contingent upon amendment to
18	the Social Security Act; amending s. 4 of ch.
19	2005-252, Laws of Florida, to delete a
20	contingency in an effective date; requiring the
21	Office of Program Policy Analysis and
22	Government Accountability to submit a report on
23	the implementation of a qualified state
24	Long-Term Care Insurance Partnership Program in
25	Florida to the Governor and Legislature;
26	providing an appropriation; providing
27	application; providing an effective date.
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29	Be It Enacted by the Legislature of the State of Florida:
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Section 1. Section 627.94075, Florida Statutes, is 2 created to read: 3 627.94075 Time limit on certain 4 defenses .-- Notwithstanding the provisions of s. 627.607, each 5 long-term care insurance policy shall provide that the policy shall be incontestable after the policy has been in force 7 during the lifetime of the insured for a period of 2 years 8 from the date of issuance of the policy, except for nonpayment 9 of premiums. 10 Section 2. Section 627.9403, Florida Statutes, is amended to read: 11 12 627.9403 Scope. -- The provisions of this part shall 13 apply to long-term care insurance policies delivered or issued for delivery in this state, and to policies delivered or 14 issued for delivery outside this state to the extent provided 15 in s. 627.9406, by an insurer, a fraternal benefit society as 16 defined in s. 632.601, a health maintenance organization as 18 defined in s. 641.19, a prepaid health clinic as defined in s. 641.402, or a multiple-employer welfare arrangement as defined 19 in s. 624.437. A policy which is advertised, marketed, or 20 21 offered as a long-term care policy and as a Medicare 22 supplement policy shall meet the requirements of this part and 23 the requirements of ss. 627.671-627.675 and, to the extent of a conflict, be subject to the requirement that is more 2.4 favorable to the policyholder or certificateholder. The 25 26 provisions of this part shall not apply to a continuing care 27 contract issued pursuant to chapter 651 and shall not apply to 2.8 guaranteed renewable policies issued prior to October 1, 1988. 29 Any limited benefit policy that limits coverage to care in a nursing home or to one or more lower levels of care required 30 or authorized to be provided by this part or by commission

rule is a type of long-term care insurance policy that must meet all requirements of this part that apply to long-term care insurance policies, except ss. 627.9407(3)(c), (9), 3 (10)(f), and (12) and 627.94073(2). If the limited benefit 4 5 policy does not provide coverage for care in a nursing home, 6 but does provide coverage for one or more lower levels of 7 care, the policy shall also be exempt from the requirements of 8 s. 627.9407(3)(d). 9 Section 3. Subsections (1) and (7) of section 10 627.9404, Florida Statutes, are amended to read: 627.9404 Definitions.--For the purposes of this part: 11 12 (1) "Long-term care insurance policy" means any 13 insurance policy or rider advertised, marketed, offered, or designed to provide coverage on an expense-incurred, 14 indemnity, prepaid, or other basis for one or more necessary 15 or medically necessary diagnostic, preventive, therapeutic, 16 curing, treating, mitigating, rehabilitative, maintenance, or 18 personal care services provided in a setting other than an acute care unit of a hospital. Long-term care insurance shall 19 not include any insurance policy which is offered primarily to 20 21 provide basic Medicare supplement coverage, basic hospital 22 expense coverage, basic medical-surgical expense coverage, 23 hospital confinement indemnity coverage, major medical expense coverage, disability income protection coverage, accident only 2.4 coverage, specified disease or specified accident coverage, or 25 limited benefit health insurance coverage not otherwise 26 27 defined as long-term care insurance. 2.8 "Limited benefit policy" means any long-term care 29 insurance policy that limits coverage to care in a nursing home or to one or more lower levels of care required or 30

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Section 4. Subsections (3) and (7) of section 627.9407, Florida Statutes, are amended to read:

627.9407 Disclosure, advertising, and performance standards for long-term care insurance.--

- $\mbox{(3)} \quad \mbox{RESTRICTIONS.--A long-term care insurance policy} \\ \mbox{may not:} \\$
- (a) Be canceled, nonrenewed, or otherwise terminated on the grounds of the age or the deterioration of the mental or physical health of the insured individual or certificateholder; however, the office may authorize nonrenewal for an insurer on a statewide basis on terms and conditions determined to be necessary by the office to protect the interests of the insureds, if the insurer demonstrates that renewal will jeopardize the insurer's solvency or that substantial and unexpected loss experience cannot reasonably be mitigated or remedied.
- (b) Contain a provision establishing a new waiting period in the event existing coverage is converted to or replaced by a new or other form within the same insurer or any affiliated insurer, except with respect to an increase in benefits voluntarily selected by the insured individual or group policyholder.
- (c) Restrict its coverage to care only in a nursing home licensed pursuant to part II of chapter 400 or provide significantly more coverage for such care than coverage for lower levels of care. The commission shall adopt rules defining what constitutes significantly more coverage in nursing homes licensed pursuant to part II of chapter 400 than for lower levels of care.
- 30 (d) Provide coverage for less than 24 consecutive
  31 months for nursing home care for each covered person.

authorized.--

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(d) (e) Contain an elimination period in excess of 180 2 days. As used in this paragraph, the term "elimination period" means the number of days at the beginning of a period of 3 confinement for which no benefits are payable. 4 (7) RATE STRUCTURE. --5 6 (a) A long-term care insurance policy may not be 7 issued if the premiums to be charged are calculated to 8 increase based solely on the age of the insured. (b) Any long-term care insurance policy or certificate 9 10 issued or renewed, at the option of the policyholder or certificateholder, shall make available to the insured the 11 12 contingent benefit upon lapse as provided in the Long-Term 13 Care Insurance Model Regulation adopted by the National Association of Insurance Commissioners in the second quarter 14 15 of the year 2000. (c) Any premium increase for existing insureds shall 16 17 not result in a premium charged the insureds which would 18 exceed the premium charged to a newly issued insurance policy, except to reflect benefit differences. If the insurer is not 19 currently issuing new coverage, the new business rate shall be 2.0 21 as published by the office at the rate representing the new 22 business rate of insurers representing 80 percent of the 23 carriers currently issuing policies with similar coverage as determined by the prior calendar year earned premium. 2.4 (d) Compliance with the pooling provisions of s. 25 627.410(6)(e)3. shall be determined by pooling the experience 26 27 of all affiliated insurers. 2.8 Section 5. Subsection (3) of section 641.2018, Florida 29 Statutes, is amended to read: 30 641.2018 Limited coverage for home health care

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1	(3) Any contract that limits coverage to home health
2	care benefits as provided in this section must also meet all
3	of the requirements of ss. 627.9403-627.9408 of the Long-Term
4	Care Insurance Act, except s. $627.9407(3)(c)$ , $(d)$ , and $(9)$ .
5	Section 6. Section 409.9102, Florida Statutes, as
6	created by section 2 of chapter 2005-252, Laws of Florida, is
7	reenacted and amended to read:
8	(Substantial rewording of section. See
9	s. 409.9102, F.S., for present text.)
10	409.9102 A qualified state Long-Term Care Insurance
11	Partnership Program in Florida The Agency for Health Care
12	Administration, in consultation with the Office of Insurance
13	Regulation and the Department of Children and Family Services,
14	is directed to establish a qualified state Long-Term Care
15	Insurance Partnership Program in Florida, in compliance with
16	the requirements of s. 1917(b) of the Social Security Act, as
17	amended.
18	(1) The program shall:
19	(a) Provide incentives for an individual to obtain or
20	maintain insurance to cover the cost of long-term care.
21	(b) Provide a mechanism to qualify for coverage of the
22	costs of long-term care needs under Medicaid without first
23	being required to substantially exhaust his or her assets,
24	including a provision for the disregard of any assets in an
25	amount equal to the insurance benefit payments that are made
26	to or on behalf of an individual who is a beneficiary under
27	the program.
28	(c) Alleviate the financial burden on the state's
29	medical assistance program by encouraging the pursuit of
3 0	private initiatives

1	(2) The Agency for Health Care Administration, in
2	consultation with the Office of Insurance Regulation and the
3	Department of Children and Family Services, and in accordance
4	with federal guidelines, shall create standards for long-term
5	care partnership program information distributed to
6	individuals through insurance companies offering approved
7	long-term care partnership program policies.
8	(3) The Agency for Health Care Administration is
9	authorized to amend the Medicaid state plan and adopt rules
10	pursuant to ss. 120.536(1) and 120.54 to implement this
11	section.
12	(4) The Department of Children and Family Services,
13	when determining eligibility for Medicaid long-term care
14	services for an individual who is the beneficiary of an
15	approved long-term care partnership program policy, shall
16	reduce the total countable assets of the individual by an
17	amount equal to the insurance benefit payments that are made
18	to or on behalf of the individual. The department is
19	authorized to adopt rules pursuant to ss. 120.536(1) and
20	120.54 to implement this subsection.
21	Section 7. Section 627.94076, Florida Statutes, is
22	created to read:
23	627.94076 A qualified state Long-Term Care Insurance
24	Partnership Program in Florida The commission may adopt
25	rules pursuant to ss. 120.536(1) and 120.54 to implement
26	applicable provisions of a qualified state Long-Term Care
27	Insurance Partnership Program in Florida in accordance with
28	the requirements of s. 1917(b) of the Social Security Act, as
29	amended, any applicable federal quidelines, and any rules
30	necessary to ensure program compliance by insurers as provided
31	in s. 409.9102.

Section 8. Sections 1 and 2 of chapter 2005-252, Laws 2 of Florida, are repealed. 3 Section 9. Section 4 of chapter 2005-252, Laws of 4 Florida, is amended to read: 5 Section 4. This act shall take effect upon becoming a 6 law, except that the amendments to section 409.905, Florida 7 Statutes, and the newly created section 409.9102, Florida 8 Statutes, provided in this act shall take effect contingent 9 upon amendment to section 1917(b)(1)(c) of the Social Security Act by the United States Congress to delete the "May 14, 10 11 1993, " deadline for approval by states of long term care 12 partnership plans. 13 Section 10. The Office of Program Policy Analysis and Government Accountability is directed to prepare a report on 14 the implementation of a qualified state Long-Term Care 15 Insurance Partnership Program in Florida. The report shall 16 17 include data on the number and value of policies sold and the geographic areas in which the policies were purchased, a 18 demographic description of the policyholders, and other 19 information necessary to evaluate the program. The report 2.0 21 shall be provided to the Governor, the President of the 2.2 Senate, and the Speaker of the House of Representatives by 23 January 31, 2009. Section 11. For fiscal year 2006-2007, the sum of 2.4 25 \$72,500 is appropriated from the Insurance Regulatory Trust Fund to the Office of Insurance Regulation for the purpose of 26 27 paying the salary and other administrative expenses for one 2.8 full-time equivalent position to implement the provisions of 29 this act. Section 12. This act shall apply to long-term care 30 insurance policies issued or renewed on or after July 1, 2006.

1	For any long-term care insurance policy issued prior to July
2	1, 2006, the provisions of section 1 of this act shall apply
3	to such policy only upon renewal of such policy on or after
4	July 1, 2008, and the policies shall so provide by endorsement
5	to the policy.
6	Section 13. This act shall take effect July 1, 2006.
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8	STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN COMMITTEE SUBSTITUTE FOR
9	SB 2290
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11	Requires the Agency for Health Care Administration (AHCA) to re-establish a qualified state Long-term Care Partnership
12	Program in Florida, in consultation with the Office of Insurance Regulation (OIR) and the Department of Children and
13	Family Services.
14	Provides certain regulatory and administrative requirements for AHCA and OIR.
15	Requires assets in an amount equal to insurance benefit
16	payments made on behalf of the beneficiary be disregarded for purposes of determining Medicaid eligibility for certain
17	individuals.
18	Repeals two provisions of chapter law that specify the design and function of a qualified state's Long-term Care Partnership
19	Program in Florida.
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