

~~(8) (4) PROVIDE THE MANAGEMENT INFORMATION AND REPORTS NECESSARY TO DOCUMENT THE EXTENT OF RESOURCE PROTECTION OFFERED AND TO EVALUATE THE PROGRAM; AND~~

~~(9) SATISFY ANY OTHER REQUIREMENT ORDERED BY THE COMMISSIONER; AND~~

~~(10) HAVE A FACE VALUE OF:~~

~~(I) NOT LESS THAN \$30,000 NOR MORE THAN \$50,000 EACH YEAR FOR A MAXIMUM TERM OF 3 YEARS FOR NURSING HOME CARE; OR~~

~~(II) NOT MORE THAN \$100,000 IN TOTAL FOR UP TO 3 YEARS OR MORE OF NURSING HOME CARE.~~

~~(C) (B) THE DEPARTMENT MAY NOT APPROVE A LONG-TERM CARE POLICY IF THE POLICY REQUIRES PRIOR HOSPITALIZATION OR A PRIOR STAY IN A NURSING HOME AS A CONDITION OF PROVIDING BENEFITS.~~

15-405.

~~(A) WHEN THE BENEFITS PAYABLE UNDER THE LONG-TERM CARE POLICY APPROVED UNDER § 15-404 OF THIS SUBTITLE ARE EXHAUSTED, THE RESOURCES OF THE INDIVIDUAL MAY NOT BE CONSIDERED BY THE DEPARTMENT IN DETERMINING THE ELIGIBILITY OF THE INDIVIDUAL FOR MEDICAL ASSISTANCE. DETERMINATION OF ELIGIBILITY FOR MEDICAL ASSISTANCE SHALL BE MADE IN ACCORDANCE WITH SUBSECTION (B) OF THIS SECTION.~~

~~(B) IN DETERMINING ELIGIBILITY FOR MEDICAL ASSISTANCE, AN AMOUNT OF RESOURCES EQUAL TO THE AMOUNT OF BENEFITS PAID UNDER THE LONG-TERM CARE POLICY SHALL BE EXCLUDED FROM THE DEPARTMENT'S CALCULATION OF THE INDIVIDUAL'S RESOURCES, TO THE EXTENT THE PAYMENTS:~~

~~(1) ARE FOR SERVICES THAT MEDICAL ASSISTANCE APPROVES OR COVERS FOR RECIPIENTS;~~

~~(2) ARE FOR THE LOWER OF THE ACTUAL CHARGE AND THE AMOUNT PAID BY THE INSURANCE COMPANY; AND~~

~~(3) ARE FOR NURSING HOME CARE OR APPROVED HOME CARE AND COMMUNITY-BASED SERVICES.~~

15-406.

THE COMMISSIONER, THROUGH THE CONSUMER EDUCATION AND ADVOCACY PROGRAM, SHALL UNDERTAKE MEASURES TO EDUCATE THE PUBLIC AS TO:

- (1) THE NEED FOR LONG-TERM CARE;
- (2) MECHANISMS FOR FINANCING LONG-TERM CARE;
- (3) THE AVAILABILITY OF LONG-TERM CARE INSURANCE; AND
- (4) THE ASSET PROTECTION PROVIDED UNDER THIS SUBTITLE.