## AMENDED IN ASSEMBLY MARCH 26, 2015

CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

## ASSEMBLY BILL

No. 310

## **Introduced by Assembly Member Mathis**

February 12, 2015

An act to-amend add and repeal Section-10231.2 10234.71 of the Insurance Code, relating to long-term care insurance.

## LEGISLATIVE COUNSEL'S DIGEST

AB 310, as amended, Mathis. Long-term care insurance.

Existing law provides for the regulation of long-term care insurance, as defined, and requires the Insurance Commissioner to review and approve individual and group policies, certificates, riders, and outlines of coverage.

This bill would make technical, nonsubstantive changes to that provision.

This bill would require, only until January 1, 2021, the commissioner to commission an annual study comparing the statutory requirements for long-term care products in this state with the statutory requirements governing long-term care products as set forth in the Interstate Insurance Product Regulation Compact developed by the Interstate Insurance Product Regulation Commission. The bill would also require the commissioner to provide a report to the Legislature, on or before January 1, 2017, and each January 1 thereafter, until January 1, 2021, comparing the marketability and affordability of long-term care insurance products in this state with similar products in New York, Texas, and Florida.

Vote: majority. Appropriation: no. Fiscal committee: <del>no yes</del>. State-mandated local program: no.

 $AB 310 \qquad \qquad -2 -$ 

The people of the State of California do enact as follows:

SECTION 1. Section 10234.71 is added to the Insurance Code, immediately following Section 10234.7, to read:

- 10234.71. (a) The commissioner shall commission an annual study comparing the statutory requirements for long-term care products in this state with the statutory requirements governing long-term care products as set forth in the Interstate Insurance Product Regulation Compact developed by the Interstate Insurance Product Regulation Commission.
- (b) The commissioner shall provide a report to the Legislature, on or before January 1, 2017, and each January 1 thereafter, comparing the marketability and affordability of long-term care insurance products in this state with similar products in New York, Texas, and Florida. The report shall be made in compliance with Section 9795 of the Government Code.
- (c) This section shall remain in effect only until January 1, 2021, and as of that date is repealed, unless a later enacted statute, that is enacted before January 1, 2021, deletes or extends that date.

SECTION 1. Section 10231.2 of the Insurance Code is amended to read:

- 10231.2. (a) "Long-term care insurance" includes any insurance policy, certificate, or rider advertised, marketed, offered, solicited, or designed to provide coverage for diagnostic, preventive, therapeutic, rehabilitative, maintenance, or personal care services that are provided in a setting other than an acute care unit of a hospital. Long-term care insurance includes all products containing any of the following benefit types: coverage for institutional care including care in a nursing home, convalescent facility, extended care facility, custodial care facility, skilled nursing facility, or personal care home; home care coverage including home health care, personal care, homemaker services, hospice, or respite care; or community-based coverage including adult day care, hospice, or respite care. Long-term care insurance includes disability based long-term care policies but does not include insurance designed primarily to provide Medicare supplement or major medical expense coverage.
- (b) Long-term care policies, certificates, and riders shall be regulated under this chapter. The commissioner shall review and approve individual and group long-term care policies, certificates,

-3— AB 310

riders, and outlines of coverage. Other applicable laws and regulations shall also apply to long-term care insurance insofar as they do not conflict with the provisions in this chapter. Long-term care benefits designed to provide coverage of 12 months or more that are contained in or amended to Medicare supplement or other disability policies and certificates shall be regulated under this chapter.