

IIPRC Member State Information for Individual Long-Term Care Insurance Uniform Standards

The information that is provided below has been supplied to the IIPRC by the Member states with regard to the Individual Long-Term Care Insurance Uniform Standards. This information will be updated as necessary.

Member	Modified Rate Schedules	Daily Policy Minimum Benefit -- NOT Partnership (other than home/health care dollar equivalent to 1/2 of nursing home & min. inflation protection required by Uniform	Daily Policy Minimum Benefit NOT Partnership?	Maximum Policy Elimination Period NOT Partnership?	Maximum Policy Elimination Period NOT Partnership?	Minimum Policy Benefit Period -- NOT Partnership (other than 12 consecutive months required by the Uniform Standards)?	Minimum Policy Benefit Period -- NOT Partnership (other than 12 consecutive months required by the Uniform Standards)?
		Offered	Issued	Offered	Issued	Offered	Issued
Alabama	PERMITTED	NO	NO	NO	NO	NO	NO
Alaska	PERMITTED	NO	NO	NO	NO	NO	NO
Arizona -- OPT OUT							
Arkansas	NOT PERMITTED	NO	NO	NO	NO	NO	NO
Colorado	NOT PERMITTED	NO	NO	NO	NO	NO	NO
Connecticut -- OPT OUT							
Georgia	PERMITTED	NO	NO	NO	NO	NO	NO
Hawaii -- OPT OUT							
Idaho	PERMITTED	NO	NO	NO	NO	NO	NO
Illinois	NOT PERMITTED	NO	NO	NO	NO	NO	NO
Indiana -- OPT OUT							
Iowa	PERMITTED	NO	NO	NO	NO	NO	NO
Kansas	PERMITTED	NO	NO	NO	NO	NO	NO
Kentucky	PERMITTED	NO	NO	NO	NO	NO	NO
Louisiana	PERMITTED	NO	NO	NO	NO	NO	NO
Maine	PERMITTED	NO	NO	NO	NO	NO	NO
Maryland	NOT PERMITTED	NO	NO	NO	NO	24 months (Insurance Article, §18-101(f)(1), Annotated Code of Maryland)	24 months (Insurance Article, §18-101(f)(1), Annotated Code of Maryland)
Massachusetts	PERMITTED	\$125 / day (130 CMR 515.014(A)(2) and 211 CMR 65.06(4)(a))	NO	365 days (211 CMR 65.05(2)(a))	365 days (211 CMR 65.05(2)(a))	730 days (211 CMR 65.05(2)(b))	730 days (211 CMR 65.05(2)(b))
Michigan	PERMITTED	NO	NO	NO	NO	NO	NO
Minnesota	PERMITTED	NO	Non Tax-Qualified Plans: must be lesser of \$40 or actual charges (<i>nursing facility</i>); lesser of \$25 or actual charges (<i>home services</i>) [Minn. Stat. §	NO	Non Tax-Qualified Plans: waiting period of up to 180 days [<i>nursing facility</i>]; 90 days [<i>home services</i>] [Minn. Stat. § 62A.48, Subd. 2]	Non Tax-Qualified Plans: 62A.48, Subd. 1; Tax-Qualified Plans: 62S.01, Subd. 18.	Non Tax-Qualified Plans: not less than 1 year (<i>nursing facility</i>); Tax-Qualified Plans: not less than 12 consecutive months {Minn. Stat. § 62A.48, Subd. 2}
Missouri	PERMITTED	NO	NO	NO	NO	NO	NO
Mississippi	PERMITTED	NO	NO	NO	NO	NO	NO

Member	Modified Rate Schedules	Daily Policy Minimum Benefit -- NOT Partnership (other than home/health care dollar equivalent to 1/2 of nursing home & min. inflation protection required by Uniform	Daily Policy Minimum Benefit NOT Partnership?	Maximum Policy Elimination Period NOT Partnership?	Maximum Policy Elimination Period NOT Partnership?	Minimum Policy Benefit Period -- NOT Partnership (other than 12 consecutive months required by the Uniform Standards)?	Minimum Policy Benefit Period -- NOT Partnership (other than 12 consecutive months required by the Uniform Standards)?
Montana -- OPT OUT							
Nebraska	PERMITTED	NO	NO	NO	NO	NO	NO
Nevada	PERMITTED	NO	NO	NO	NO	NO	NO
New Hampshire	PERMITTED	NO	NO	NO	NO	NO	NO
New Jersey -- OPT OUT							
New Mexico	PERMITTED	NO	NO	NO	NO	NO	NO
North Carolina	PERMITTED	NO	NO	NO	NO	NO	NO
Ohio	PERMITTED	NO	NO	NO	NO	NO	NO
Oklahoma	NOT PERMITTED	NO	NO	NO	NO	NO	NO
Oregon	NOT PERMITTED	NO	NO	NO	NO	24 months (ORS 743.655(2)(f))	24 months (ORS 743.655(2)(f))
Pennsylvania	PERMITTED	NO	NO	NO	NO	NO	NO
Puerto Rico	PERMITTED	NO	NO	NO	NO	NO	NO
Rhode Island	PERMITTED	NO	NO	NO	NO	NO	NO
South Carolina	PERMITTED	NO	NO	NO	NO	NO	NO
Tennessee	PERMITTED	NO	NO	NO	NO	NO	NO
Texas	PERMITTED	NO	NO	NO	NO	NO	NO
Utah	PERMITTED	NO	NO	NO	NO	NO	NO
		Offer 3 benefit options: \$100 max per day/90 or 100 day elimination period/2 yr benefit period AND \$150 max per day/90 or 100 day elimination period/3 yr benefit period AND \$200 max per day/90 or 100 day elimination period/5 yr benefit period. (DFR) Rule H-2009-01 Long-Term Insurance Regulation, Section 6 (K)(1)(a-c)	Not less than \$75 per day (DFR Rule H-2009-01 Long-Term Insurance Regulation, Section 6 (J)(5))	Offer 3 benefit options: \$100 max per day/90 or 100 day elimination period/2 yr benefit period AND \$150 max per day/90 or 100 day elimination period/3 yr benefit period AND \$200 max per day/90 or 100 day elimination period/5 yr benefit period. (DFR) Rule H-2009-01 Long-Term Insurance Regulation, Section 6 (K)(1)(a-c)	Not greater than 100 days (DFR Rule 2009-01 Long-Term Insurance Regulation, Section 6(I)(2))	Offer 3 benefit options: \$100 max per day/90 or 100 day elimination period/2 yr benefit period AND \$150 max per day/90 or 100 day elimination period/3 yr benefit period AND \$200 max per day/90 or 100 day elimination period/5 yr benefit period. (DFR) Rule H-2009-01 Long-Term Insurance Regulation, Section 6 (K)(1)(a-c)	No less than 365 benefit days (DFR Rule H-2009-01 Long-Term Insurance Regulation, Section 6 (J)(5).)
Vermont	PERMITTED						
Virginia	PERMITTED	NO	NO	NO	NO	NO	NO

Member	Modified Rate Schedules	Daily Policy Minimum Benefit -- NOT Partnership (other than home/health care dollar equivalent to 1/2 of nursing home & min. inflation protection required by Uniform		Maximum Policy Elimination Period NOT Partnership?	Maximum Policy Elimination Period NOT Partnership?	Minimum Policy Benefit Period -- NOT Partnership (other than 12 consecutive months required by the Uniform Standards)?	Minimum Policy Benefit Period -- NOT Partnership (other than 12 consecutive months required by the Uniform Standards)?
		Daily Policy Minimum Benefit NOT Partnership?	Daily Policy Minimum Benefit NOT Partnership?				
Washington	NOT PERMITTED	\$25 / day for home health care services(WAC 284-83-050 (3) (b))	\$25 / day for home health care services (WAC 284-83-050 (3) (b))	NO	NO	365 days for home health care services (WAC 284-83-050 (3) (b))	365 days for home health care services (WAC 284-83-050 (3) (b))
West Virginia	PERMITTED	NO	NO	NO	NO	NO	NO
Wisconsin	PERMITTED	\$60 (Ins 3.46(4)(b), Wis. Adm. Code)	\$60 (Ins 3.46(4)(b), Wis. Adm. Code)	180 days (Ins 3.46(12)(a), Wis. Adm. Code)	180 days (Ins 3.46(4)(d), Wis. Adm. Code)	365 days (Ins 3.46(4)(e), Wis. Adm. Code)	366 days (Ins 3.46(4)(e), Wis. Adm. Code)
Wyoming	PERMITTED	NO	NO	NO	NO	NO	NO