

VIRGINIA ACTS OF ASSEMBLY -- 1996 SESSION

CHAPTER 628

An Act to amend the Code of Virginia by adding a section numbered 38.2-226.1, relating to insurance regulation; exemptions for certain health plans.

[H 1130]

Approved April 5, 1996

Be it enacted by the General Assembly of Virginia:

1. That the Code of Virginia is amended by adding a section numbered 38.2-226.1 as follows:

§ 38.2-226.1. Provisions of title not applicable to certain long-term care prepaid health plans.

A. This title shall not apply to pre-PACE, long-term care prepaid health plans (i) authorized by the United States Health Care Financing Administration pursuant to § 1903 (m) (2) (B) of Title XIX of the United States Social Security Act and the state plan for medical assistance services as established pursuant to Chapter 10 (§ 32.1-323 et seq.) of Title 32.1 and (ii) which have signed agreements with the Department of Medical Assistance Services as long-term care prepaid health plans.

B. The pre-PACE, long-term care prepaid health plans identified in subsection A may include coverage for individuals who have made application for medical assistance services pursuant to Chapter 10 (§ 32.1-323 et seq.) of Title 32.1. Such coverage shall not extend beyond ninety days after the date of such application unless (i) such individuals' applications are approved or (ii) any disapproval thereof is pending appeal conforming to the procedures established for the same by the Department of Medical Assistance Services, and then only for the duration of such appeal.

2. That the provisions of this act shall expire on July 1, 1997.

3. That the Joint Commission on Health Care, in cooperation with the Department of Medical Assistance Services and the Bureau of Insurance of the State Corporation Commission, shall conduct a study to: (i) determine whether the exemptions established by the bill should be continued in existing or modified form beyond July 1, 1997; and (ii) identify an appropriate state regulatory policy for pre-PACE and PACE projects which may provide coverage for individuals who are not eligible for Medicaid. The Joint Commission on Health Care shall report its findings and recommendations to the Governor and the 1997 Session of the General Assembly.