- (4) Provide the management information and reports necessary to document the extent of resource protection offered and to evaluate the Program.
- (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, 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.

## 15-407.

The Department and the Commissioner shall jointly: