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COMMISSIONER OF INSURANCE

**Bulletin 99-06**

**To: Issuers Offering Medicare Supplemental Insurance  
HMOs Offering Medicare Managed Care Plans**

**From: Commissioner Linda Ruthardt**

**Re: Required Open Enrollment Period To Be Held Pursuant to M.G.L. c. 176K**

**Date: September 15, 1999**

The purpose of this bulletin is to inform all issuers offering Medicare Supplement insurance policies and HMOs offering Medicare managed care plans that are subject to the provisions of M.G.L. c. 176K that such carriers must participate in a required open enrollment period pursuant to M.G.L. c. 176K, sections 2(b) and 3(g), as well as 211 CMR 71.10(6). The Division has scheduled this open enrollment period because it has been notified by the federal Health Care Financing Administration (HCFA) that HCFA's contracts with Community Health Plan d/b/a Kaiser Permanente (Kaiser), and those with Harvard Pilgrim Health Care, Inc. (HPHC) and United Healthcare of New England, Inc. (UHCNE) in the counties identified below will no longer be in effect after December 31, 1999 for the purposes of individual/direct pay enrollment.

This required open enrollment period will be for carriers marketing Medicare Supplement plans and Medicare HMO products within the Medicare-approved service areas for the following plans:

- Kaiser's Medicare managed care plan marketed as *MedicarePlus*.
- HPHC's Medicare managed care plan marketed as *First Seniority* - for the Hampden, Hampshire, and Franklin County service areas.
- UHCNE's Medicare managed care plan marketed as *Medicare Complete* - for the Worcester County service area.

This special open enrollment period has been scheduled from **October 1, 1999 to November 30, 1999**.

This open enrollment period is available to persons in the affected service areas who are enrolled in *MedicarePlus*, *First Seniority* and *Medicare Complete* as of September 30, 1999 and

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who meet the definition of Eligible Person found in 211 CMR 71.03. Carriers must make available to these individuals all Medicare Supplement policies or Evidences of Coverage of Medicare managed care plans currently available from the carrier. Coverage must be effective on January 1, 2000; provided, however, that if a carrier can accommodate an earlier effective date and the applicant chooses to have coverage with that carrier start before January 1, 2000, an effective date prior to January 1, 2000 is acceptable.

Carriers are reminded that mandatory participation in this special open enrollment period is in addition to compliance with all other required enrollment rights afforded to individuals pursuant to the federal Balanced Budget Act of 1997.

Carriers are reminded that the noted special open enrollment period is based upon information available as of this date and may need to be modified if there are any future changes to HCFA's contracts with other Medicare HMO plans. Any questions regarding this Bulletin should be directed to Kevin Beagan, Director of the Health Unit of the State Rating Bureau at the Division of Insurance, at (617) 521-7347.