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LINDA RUTHARDT
COMMISSIONER OF INSURANCE

Bulletin 2001-19

To: Issuers Offering Medicare Supplemental Insurance
Health Maintenance Organizations (HMOs) Offering Medicare Managed Care Plans

From: Commissioner Linda Ruthardt

Re: Persons Eligible for Federally Required Medicare Supplement Open Enrollment Period

Date: December 21, 2001

The purpose of this bulletin is to clarify which Massachusetts residents are eligible to enroll in Medicare Supplement insurance policies during the federally required Special Enrollment Period that was identified in Bulletin 2001-18. As noted in that bulletin, carriers participating in the Medicare Supplement market are required to offer all enrollees in Medicare+Choice plans the right to purchase a Medicare Supplement Core or Medicare Supplement 1 policy, provided that the Medicare+Choice enrollees leave the health plan they are currently enrolled in no later than December 31, 2001. Such Special Enrollment Period will exist for such individuals through March 4, 2002 - the 63rd day after December 31, 2001.

The Division of Insurance has been asked to clarify what types of information an applicant would need to provide as proof of eligibility during this Special Enrollment Period. As noted above, a person is eligible to apply for Medicare Supplement Core or Medicare Supplement 1 if they leave their existing Medicare+Choice plan no later than December 31, 2001. The Division would consider Medicare Supplement carriers to be in compliance with M.G.L. c. 176K and 211 CMR 71.00 if they accept, as sufficient proof of eligibility, a copy of the signed letter that an applicant has sent to his/her Medicare+Choice carrier to terminate coverage.

As noted in Bulletin 2001-18, carriers must ensure that applicants who apply during this Special Enrollment Period are given the opportunity to make their coverage effective as of January 1, 2002 coincident with the date and time that the applicant has disenrolled from his or her Medicare HMO plan and returned to traditional Medicare coverage. Carriers should prepare their systems to ensure that there is a seamless transition to Medicare Supplement coverage regardless of when applications are processed. The attached document from the federal Department of Health and Human Services describes issuer obligations under this Special Enrollment Period.

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, or faxed to (617) 521-7773.