



COMMONWEALTH OF MASSACHUSETTS
Office of Consumer Affairs and Business Regulation
DIVISION OF INSURANCE

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LINDA RUTHARDT
COMMISSIONER OF INSURANCE

Bulletin 2002-02

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

From: Commissioner Linda Ruthardt

Re: Optional Enrollment Periods in Response to the Federally Required Medicare Supplement Open Enrollment Period Referenced in Bulletin 2001-18

Date: January 24, 2002

The purpose of this bulletin is to clarify the Division's position regarding carriers voluntarily permitting Medicare+Choice enrollees to be eligible for the same special enrollment rights if they leave the health plan in which they are currently enrolled after December 31, 2001.

In Bulletin 2001-18, the Division of Insurance notified all companies offering Medicare Supplement Insurance and all Health Maintenance Organizations offering Medicare Managed Care Plans that the federal Secretary of Health and Human Services declared the month of December 2001 to be a Special Enrollment Period based on exceptional circumstances. The Division issued Bulletin 2001-18 to notify all carriers subject to M.G.L. c. 176K that they are required to participate in a required open enrollment period pursuant to 211 CMR 71.10(13)(b)2.v.

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 - the Massachusetts plans equivalent to the Medigap A, B, C or F plans described in the federal notice - 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.

Although there may have been delays in notifying persons regarding the federal open enrollment, the Division is aware that the federal government has not modified its requirement that its open enrollment period only applies to those who left their Medicare+Choice plan by December 31, 2001. It is the Division's position that carriers have the option to extend the open enrollment period required under 211 CMR 71.10(13)(b)2.v. to a period not later than March 31, 2002 and not be subject to the guarantee issue requirements described in 211 CMR 71.10(8) and (9), provided that they notify the Division of such voluntary extension prior to implementation.

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.