## **HOUSE BILL 247**

J5 2lr1531

HB 1063/21 – HGO

By: Delegates Reznik, Jalisi, McComas, Moon, Valentino–Smith, and K. Young Introduced and read first time: January 13, 2022 Assigned to: Health and Government Operations

## A BILL ENTITLED

4	A TAT		•
1	AN	ACT	concerning

## Insurance – Medicare Supplement Policy Plans – Open Enrollment Period Following Birthday

4 FOR the purpose of requiring a carrier, during a certain time period following the 5 individual's birthday, to make available to an individual enrolled in a Medicare 6 supplement policy plan different Medicare supplement policy plans with benefits 7 that are equal to or less than the benefits of the individual's existing coverage; 8 prohibiting a carrier, for a plan required to be made available under this Act, from 9 denying or conditioning the effectiveness of the plan, discriminating in the pricing of the plan, or denying, reducing, or conditioning coverage to the individual based on 10 11 certain factors; and generally relating to Medicare supplement policy plans.

- 12 BY adding to
- 13 Article Insurance
- 14 Section 15–909(b)(6)
- 15 Annotated Code of Maryland
- 16 (2017 Replacement Volume and 2021 Supplement)
- 17 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
- 18 That the Laws of Maryland read as follows:

## 19 Article – Insurance

- 20 15-909.
- 21 (b) (6) (I) DURING THE 30 DAYS FOLLOWING THE BIRTHDAY OF AN
- 22 INDIVIDUAL ENROLLED IN A MEDICARE SUPPLEMENT POLICY PLAN, A CARRIER
- 23 SHALL MAKE AVAILABLE TO THE INDIVIDUAL DIFFERENT MEDICARE SUPPLEMENT
- 24 POLICY PLANS WITH BENEFITS THAT ARE EQUAL TO OR LESS THAN THE BENEFITS
- 25 OF THE INDIVIDUAL'S EXISTING COVERAGE.

1 (II) A REPLACEMENT ME	EDICARE SUPPLEMENT POLICY PLAN
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- 2 MADE AVAILABLE TO AN INDIVIDUAL UNDER SUBPARAGRAPH (I) OF THIS
- 3 PARAGRAPH SHALL BE DEEMED TO HAVE BENEFITS THAT ARE EQUAL TO OR LESS
- 4 THAN THE INDIVIDUAL'S EXISTING COVERAGE UNLESS:
- 5 1. THE REPLACEMENT PLAN CONTAINS:
- 6 A. COVERAGE FOR 100% OF THE MEDICARE PART A
- 7 DEDUCTIBLE; OR
- B. COVERAGE FOR PART B EXCESS CHARGES; AND
- 9 ONE OR BOTH OF THE BENEFITS DESCRIBED UNDER
- 10 ITEM 1A AND B OF THIS SUBPARAGRAPH ARE NOT INCLUDED IN THE INDIVIDUAL'S
- 11 EXISTING COVERAGE.
- 12 (III) FOR A MEDICARE SUPPLEMENT POLICY PLAN REQUIRED TO
- 13 BE MADE AVAILABLE UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH, A CARRIER
- 14 **MAY NOT:**
- 1. DENY OR CONDITION THE ISSUANCE OR
- 16 EFFECTIVENESS OF A MEDICARE SUPPLEMENT POLICY PLAN, OR DISCRIMINATE IN
- 17 THE PRICING OF THE PLAN, BECAUSE OF THE HEALTH STATUS, CLAIMS
- 18 EXPERIENCE, OR MEDICAL CONDITION OF THE INDIVIDUAL OR THE RECEIPT OF
- 19 HEALTH CARE BY THE INDIVIDUAL; OR
- 20 DENY, REDUCE, OR CONDITION COVERAGE TO THE
- 21 INDIVIDUAL FOR A MEDICARE SUPPLEMENT POLICY PLAN BECAUSE OF THE HEALTH
- 22 STATUS, CLAIMS EXPERIENCE, OR MEDICAL CONDITION OF THE INDIVIDUAL OR THE
- 23 USE OF MEDICAL CARE BY THE INDIVIDUAL.
- 24 (IV) A CARRIER THAT OFFERS MEDICARE SUPPLEMENT POLICY
- 25 PLANS SHALL NOTIFY AN INSURED OF THE INSURED'S RIGHTS UNDER THIS
- 26 PARAGRAPH AT LEAST 30 DAYS, BUT NOT MORE THAN 60 DAYS, BEFORE THE
- 27 INSURED'S BIRTHDAY.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
- 29 October 1, 2022.