

Chapter 680

(House Bill 247)

AN ACT concerning

**Insurance – Medicare Supplement ~~Policy Plans~~ Policies – Open Enrollment
Period Following Birthday**

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

BY repealing and reenacting, with amendments,Article – InsuranceSection 15–909(b)(2)Annotated Code of Maryland(2017 Replacement Volume and 2021 Supplement)

BY adding to

Article – Insurance

Section 15–909(b)(6)

Annotated Code of Maryland

(2017 Replacement Volume and 2021 Supplement)

BY repealing and reenacting, without amendments,Article – InsuranceSection 15–909(d)Annotated Code of Maryland(2017 Replacement Volume and 2021 Supplement)

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That the Laws of Maryland read as follows:

Article – Insurance

15–909.

(b) (2) Notwithstanding [paragraph] PARAGRAPHS (1)(ii) OR (6)(III)2 of this subsection, a carrier may include in a Medicare supplement policy a provision that complies with subsection (d) of this section.

~~(b)~~ (6) (I) THIS PARAGRAPH APPLIES ONLY ON AND AFTER JULY 1, 2023.

(II) DURING THE 30 DAYS FOLLOWING THE BIRTHDAY OF AN INDIVIDUAL ENROLLED IN A MEDICARE SUPPLEMENT POLICY ~~PLAN~~, A CARRIER SHALL MAKE AVAILABLE TO THE INDIVIDUAL DIFFERENT MEDICARE SUPPLEMENT ~~POLICY PLANS~~ POLICIES WITH BENEFITS THAT ARE EQUAL TO OR LESS THAN THE BENEFITS OF THE INDIVIDUAL'S EXISTING COVERAGE.

~~(II) A REPLACEMENT MEDICARE SUPPLEMENT POLICY PLAN MADE AVAILABLE TO AN INDIVIDUAL UNDER SUBPARAGRAPH (I) OF THIS PARAGRAPH SHALL BE DEEMED TO HAVE BENEFITS THAT ARE EQUAL TO OR LESS THAN THE INDIVIDUAL'S EXISTING COVERAGE UNLESS:~~

~~1. THE REPLACEMENT PLAN CONTAINS:~~

~~A. COVERAGE FOR 100% OF THE MEDICARE PART A DEDUCTIBLE; OR~~

~~B. COVERAGE FOR PART B EXCESS CHARGES; AND~~

~~2. ONE OR BOTH OF THE BENEFITS DESCRIBED UNDER ITEM 1A AND B OF THIS SUBPARAGRAPH ARE NOT INCLUDED IN THE INDIVIDUAL'S EXISTING COVERAGE.~~

(III) 1. FOR PURPOSES OF THIS PARAGRAPH, A MEDICARE SUPPLEMENT POLICY HAS EQUAL OR LESSER BENEFITS UNLESS:

A. IT CONTAINS ONE OR MORE SIGNIFICANT BENEFITS NOT INCLUDED IN THE MEDICARE SUPPLEMENT POLICY BEING REPLACED; OR

B. IT CONTAINS THE SAME SIGNIFICANT BENEFITS INCLUDED IN THE MEDICARE SUPPLEMENT POLICY BEING REPLACED BUT IT REDUCES THE COST-SHARING RESPONSIBILITIES OF THE ENROLLEE FOR THE BENEFITS.

2. THE COMMISSIONER SHALL ADOPT REGULATIONS ESTABLISHING A MATRIX FOR IDENTIFYING WHICH MEDICARE SUPPLEMENT POLICIES HAVE EQUAL OR LESSER BENEFITS.

~~(III)~~ **(IV)** FOR A MEDICARE SUPPLEMENT POLICY ~~PLAN~~ REQUIRED TO BE MADE AVAILABLE UNDER SUBPARAGRAPH ~~(I)~~ **(II)** OF THIS PARAGRAPH, A CARRIER MAY NOT:

1. DENY OR CONDITION THE ISSUANCE OR EFFECTIVENESS OF A MEDICARE SUPPLEMENT POLICY ~~PLAN~~, OR DISCRIMINATE IN THE PRICING OF THE ~~PLAN~~ POLICY, BECAUSE OF THE HEALTH STATUS, CLAIMS EXPERIENCE, OR MEDICAL CONDITION OF THE INDIVIDUAL OR THE RECEIPT OF HEALTH CARE BY THE INDIVIDUAL; OR

2. DENY, REDUCE, OR CONDITION COVERAGE TO THE INDIVIDUAL FOR A MEDICARE SUPPLEMENT POLICY ~~PLAN~~ BECAUSE OF THE HEALTH STATUS, CLAIMS EXPERIENCE, OR MEDICAL CONDITION OF THE INDIVIDUAL OR THE USE OF MEDICAL CARE BY THE INDIVIDUAL.

~~(IV)~~ **(V)** A CARRIER THAT OFFERS MEDICARE SUPPLEMENT ~~POLICY PLANS~~ POLICIES SHALL NOTIFY AN INSURED OF THE INSURED'S RIGHTS UNDER THIS PARAGRAPH AT LEAST 30 DAYS, BUT NOT MORE THAN 60 DAYS, BEFORE THE INSURED'S BIRTHDAY.

(d) (1) Notwithstanding any other provision of law, a Medicare supplement policy or certificate may not exclude or limit benefits for losses incurred more than 6 months after the effective date of coverage because the losses involved a preexisting condition.

(2) A Medicare supplement policy or certificate may not define a preexisting condition more restrictively than a condition for which a physician gave medical advice or recommended or gave treatment within 6 months before the effective date of coverage.

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect ~~October 1, 2022~~ January 1, 2023.

Enacted under Article II, § 17(c) of the Maryland Constitution, May 29, 2022.