

§5002-B. Continuity of coverage

1. Persons provided continuity of coverage. This section provides continuity of coverage for a person who has a Medicare supplement policy and seeks coverage under a new Medicare supplement policy with the same or lesser benefits if:

A. That person, including a person entitled to Medicare benefits due to disability, has been covered under a policy that supplemented benefits under Medicare or has been covered under a Medicare Advantage plan with no gap in coverage greater than 90 days beginning with the person's open enrollment period. A policy supplementing benefits payable under Medicare may include an individual health policy, a group health plan, a Medicare supplement policy or other coverage issued by the same or a different carrier. [PL 2009, c. 244, Pt. A, §1 (AMD).]

B. [PL 2003, c. 157, §1 (RP).]

C. [PL 2003, c. 157, §1 (RP).]
[PL 2009, c. 244, Pt. A, §1 (AMD).]

2. Prohibition against discontinuity. The insurer shall, for any person described in subsection 1, waive any medical underwriting or preexisting conditions exclusion to the extent that benefits would have been payable under the prior Medicare supplement policy and any earlier Medicare supplement policy if those policies were still in effect. This subsection does not require the succeeding insurer to pay any benefits that are not within the terms of coverage of the succeeding policy solely because they would have been paid by the prior policy.

[PL 2003, c. 157, §1 (AMD).]

2-A. Low-cost drugs for the elderly or disabled program.

[PL 2013, c. 94, §1 (RP).]

3. Determination of benefits. When a determination of benefits under the prior policy is required, the issuer of the prior policy shall, at the request of the issuer of the succeeding policy, furnish a statement of benefits available or pertinent information sufficient to permit verification of the benefit determination or the determination itself by the issuer of the succeeding policy. For purposes of this section, benefits of the prior policy are determined in accordance with the definitions, conditions and covered expense provisions of that policy rather than those of the succeeding policy. The benefit determination must be made as if coverage had not been replaced.

[PL 1999, c. 36, §4 (NEW).]

4. Rulemaking. The superintendent shall adopt rules concerning guaranteed issuance and continuity of Medicare supplement policies for certain eligible persons. Rules adopted pursuant to this subsection are routine technical rules as defined in Title 5, chapter 375, subchapter II-A.

[PL 1999, c. 36, §4 (NEW).]

SECTION HISTORY

PL 1999, c. 36, §4 (NEW). PL 2001, c. 410, Pt. B, §7 (AMD). PL 2003, c. 157, §1 (AMD). PL 2005, c. 401, Pt. C, §7 (AMD). PL 2009, c. 244, Pt. A, §1 (AMD). PL 2013, c. 94, §1 (AMD).

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