

State of Idaho
DEPARTMENT OF INSURANCE

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BULLETIN NO. 23-04

DATE: March 22, 2023
TO: All Insurers Offering Medicare Supplement Policies
FROM: Dean L. Cameron, Director
SUBJECT: Medicare Supplement Guaranteed Issue Eligibility

Pursuant to federal Medicaid continuous coverage requirements, Idaho residents who were enrolled in Medicaid during the public health emergency remained covered by Medicaid, regardless of eligibility changes. The process to redetermine Medicaid eligibility for those Idahoans is expected to be conducted throughout 2023.

The Department of Insurance finds that Idaho residents who were temporarily eligible for Medicaid during the public health emergency and who enrolled in Medicare Part B more than six months before their Medicaid eligibility ended may miss their opportunity to purchase a Medicare supplement policy under the current rule. Similarly, Idaho residents who delayed enrollment in Part B despite being eligible, while temporarily remaining on Medicaid may have missed their opportunity to purchase a Medicare supplement policy.

On November 3, 2022, the Department of Health and Human Services announced an amendment to 42 CFR § 406.27. This amendment creates a special Medicare enrollment period for people who were unable to enroll in Medicare because of an emergency declaration.

To ensure Idahoans have access to coverage they could have obtained if not for the emergency declaration, and in accordance with IDAPA 18.04.10, the Department directs insurers writing Medicare supplement policies to guarantee the issue of any Medicare supplement policies available in this state to applicants who:

1. Are enrolled in Medicare Part B while enrolled in medical assistance under Title XIX of the Social Security Act (Medicaid);
2. Remained in Medicaid due to a suspension of terminations by Medicaid during a state of emergency and were not disenrolled or terminated until at least six months following the effective date of enrollment in Medicare Part B, or enrolled in Part B for the first time upon termination of the temporary Medicaid continuous coverage;
3. Apply for the Medicare supplement policy during the 63 days following the later of their notice of termination or disenrollment from Medicaid or their date of termination from Medicaid, or apply during the six-month period following the first day of the first month in which the applicant is enrolled in Part B; and

4. Submit evidence of the date of termination or disenrollment from Medicaid with the application for a Medicare supplement policy.

Idaho prohibits insurers from using a preexisting condition to:

- Deny or condition the issuance or effectiveness of a Medicare supplement policy that is offered and is available for issuance to new enrollees by the issuer;
- Discriminate in the pricing of such a Medicare supplement policy because of health status, claims experience, receipt of health care, or medical condition; or
- Exclude certain applicants from receiving benefits. These applicants typically have applied within six months of the first day of the first month in which the applicant is eligible for Medicare and has enrolled in Medicare Part B. IDAPA 18.04.10.41.

This Bulletin will remain in effect until 90 days after Idaho Health and Welfare completes all redeterminations and disenrollments related to the temporary Medicaid continuous coverage.

This Bulletin is not new law but is an agency interpretation of existing law, except as authorized by law or as incorporated into a contract. Requests for additional information or other inquiries regarding this Bulletin can be directed to Deputy Director Wes Trexler at 208-334-4214 or weston.trexler@doi.idaho.gov.