

Title 31 MARYLAND INSURANCE ADMINISTRATION

Subtitle 10 HEALTH INSURANCE — GENERAL

Chapter 06 Standards for Medicare Supplement Policies

Authority: Health-General Article, §§19-705 and 19-706; Insurance Article, §§2-109 and 8-403(b), Title 15, Subtitle 9, and Title 27; Annotated Code of Maryland

.06 Open Enrollment.

A. [Individuals 65 Years Old or Older and Enrolled in Medicare Part B.] *Period of Open Enrollment.*

(1) An issuer may not deny or condition the issuance or effectiveness of any Medicare supplement policy or certificate available for sale in this State, nor discriminate in the pricing of the policy or certificate because of the health status, claims experience, receipt of health care, or medical condition of an applicant when:

(a) an application for the policy or certificate is submitted during the 6-month period beginning with the first day of the first month in which an individual is both 65 years old or older and is enrolled for benefits under Medicare Part B; or

(b) an application for the policy or certificate is submitted on or up to thirty days after the birthday of an individual enrolled in a Medicare supplement policy or certificate.

(2) Each Medicare supplement policy and certificate currently available from an issuer shall be made available to all applicants who qualify under §A(1)(a) of this regulation without regard to age.

(3) *Subject to Regulation .31A of this chapter, an insurer shall make available to applicants who qualify under §A(1)(b) of this regulation Medicare supplement policies or certificates with benefits that are equal to or less than the benefits of the applicant's existing Medicare supplement policy or certificate. For the purpose of this regulation, "benefits that are equal to or less than the benefits of the applicant's existing Medicare supplement policy or certificate" means a policy or certificate of the same or lower benefit level as indicated in the below chart:*

Existing Plan	Lesser or Equal Plan
Plan A	Plan A
Plan B	Plan A or B
Plan C	Plan A, B, C, D, K, L, M or N
Plan D	Plan A, B, D, K, L, M or N
Plan E	Plan A, B, C, D, F, F with a high deductible, G, G with a high deductible, K, L, M, or N
Plan F	Plan A, B, C, D, F, F with a high deductible, G, G with a high deductible, K, L, M, or N
Plan F with a high deductible	Plan F with a high deductible or G with a high deductible
Plan G	Plan A, B, D, G, K, L, M, N, F with a high deductible or G with a high deductible
Plan G with a high deductible	Plan G with a high deductible
Plan H	Plan A, B, D, K, L, M or N
Plan I	Plan A, B, D, G, K, L, M or N
Plan J	Plan A, B, C, D, F, F with a high deductible, G, G with a high deductible, K, L, M, or N
Plan J with a high deductible	Plan F with a high deductible or G with a high deductible
Plan K	Plan K
Plan L	Plan K or L
Plan M	Plan M or N
Plan N	Plan N

B. – D. (text unchanged) Application of Creditable Coverage.