

MEDICARE SUPPLEMENT

New Guarantee Keeps Options Open

The Balanced Budget Act of 1997 provides additional benefits to the buying public. Since July 1, 1998, Medicare beneficiaries who have lost their health insurance under certain criteria have been guaranteed Medicare Supplement coverage on Plans A, B, C or F.

To qualify for this protection, individuals must have been enrolled in Medicare and apply for a new Medigap policy within 63 days of losing their other health coverage under the following conditions:



- Their enrollment in a Health Maintenance Organization, Health Care Prepayment Plan or Medicare SELECT coverage ended when they moved outside the plan's service area, the plan's contract with Medicare ended or they decided to leave the plan.
- The previous Medigap policy was dropped to enroll in a Medicare HMO or Medicare SELECT policy for the first time.
- Benefits from an employer group health plan that supplemented Medicare stopped providing benefits.
- They chose to disenroll from the Medicare HMO or Medicare SELECT policy within 12 months of first enrolling.
- Enrollment in a Medigap policy stopped because of insolvency of the company, other involuntary termination of coverage or the company violated or misrepresented a provision of the policy.

See page 25 of your 1998 Guide To Health Insurance for People with Medicare for more details.

Note: *Should the prospect wish to apply for one of our guarantee issue plans, Form HMGI will need to be completed and attached to the application. Special rules apply for Wisconsin, Massachusetts and Minnesota.*