

**191—37.9(514D) Standard Medicare supplement benefit plans for 2020 standardized Medicare supplement benefit plan policies or certificates issued for delivery to individuals newly eligible for Medicare on or after January 1, 2020.** The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) requires that the following standards are applicable to all Medicare supplement policies or certificates delivered or issued for delivery in this state to individuals newly eligible for Medicare on or after January 1, 2020. No policy or certificate that provides coverage of the Medicare Part B deductible may be advertised, solicited, delivered or issued for delivery in this state as a Medicare supplement policy or certificate to individuals newly eligible for Medicare on or after January 1, 2020. All policies must comply with the following benefit standards. Benefit plan standards applicable to Medicare supplement policies and certificates issued to individuals eligible for Medicare before January 1, 2020, remain subject to the requirements of rules 191—37.6(514D), 191—37.7(514D) and 191—37.8(514D).

**37.9(1) *Benefit requirements.*** The standards and requirements of rule 191—37.8(514D) shall apply to all Medicare supplement policies or certificates delivered or issued for delivery to individuals newly eligible for Medicare on or after January 1, 2020, with the following exceptions:

*a.* Plan C is redesignated as Plan D and shall provide the benefits contained in paragraph 37.8(4) “c” but shall not provide coverage for 100 percent or any portion of the Medicare Part B deductible.

*b.* Plan F is redesignated as Plan G and shall provide the benefits contained in paragraph 37.8(4) “e” but shall not provide coverage for 100 percent or any portion of the Medicare Part B deductible.

*c.* Plans C, F, and F with high deductible may not be offered to individuals newly eligible for Medicare on or after January 1, 2020.

*d.* Plan F with high deductible is redesignated as Plan G with high deductible and shall provide the benefits contained in paragraph 37.8(4) “f,” but shall not provide coverage for 100 percent or any portion of the Medicare Part B deductible; provided further that the Medicare Part B deductible paid by the covered individual shall be considered an out-of-pocket expense in meeting the annual high deductible.

*e.* The reference to Plan C or F contained in paragraph 37.8(2) “b” is deemed a reference to Plan D or G for purposes of this rule.

**37.9(2) *Applicability to certain newly eligible individuals.*** This rule applies only to individuals who are newly eligible for Medicare on or after January 1, 2020, by reason of:

*a.* Attaining age 65 on or after January 1, 2020; or

*b.* Entitlement to benefits under Medicare Part A pursuant to Section 226(b) or 226A of the Social Security Act, or who are deemed to be eligible for benefits under Section 226(a) of the Social Security Act on or after January 1, 2020.

**37.9(3) *Guaranteed issue for eligible persons.*** For purposes of rule 191—37.36(514D), in the case of any individual newly eligible for Medicare on or after January 1, 2020, any reference to a Medicare supplement Plan C or F (including Plan F with high deductible) shall be deemed to be a reference to Medicare supplement Plan D or G (including Plan G with high deductible), respectively, that meets the requirements of this rule.

**37.9(4) *Offer of redesignated plans to individuals other than newly eligible.*** On or after January 1, 2020, the standardized benefit plans described in paragraph 37.9(1) “d” may be offered to any individual who was eligible for Medicare prior to January 1, 2020, in addition to the standardized plans described in subrule 37.8(4).

[ARC 4394C, IAB 4/10/19, effective 5/15/19]