

House File 308 - Introduced

HOUSE FILE 308
BY COMMITTEE ON COMMERCE

(SUCCESSOR TO HF 70)

A BILL FOR

1 An Act relating to Medicare supplement policies and an annual
2 open enrollment period.

3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

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1 Section 1. NEW SECTION. **514M.1 Medicare supplement**
2 **insurance — annual open enrollment.**

3 1. For purposes of this section, unless the context otherwise
4 requires:

5 a. "Applicant" means an individual who is a covered person
6 under an individual or group Medicare supplement policy.

7 "Applicant" includes an individual under the age of sixty-five
8 who qualifies for Medicare due to disability, end-stage renal
9 disease, or exposure to an environmental hazard.

10 b. "Certificate" means any certificate of coverage delivered
11 or issued for delivery in this state to a covered individual
12 under a group Medicare supplement policy.

13 c. "Issuer" means an insurance company, a fraternal benefit
14 society, a health care service plan, a health maintenance
15 organization, or any other entity delivering or issuing for
16 delivery in this state a Medicare supplement policy or
17 certificate.

18 d. "Medicare supplement policy" means an individual or group
19 policy of accident and sickness insurance or a subscriber
20 contract of hospital and medical service associations or health
21 maintenance organizations, other than a policy issued pursuant
22 to a contract under section 1876 of the federal Social Security
23 Act, as codified in 42 U.S.C. §1395 et seq., or an issued policy
24 under an approved demonstration project described in section
25 603(c) of the Social Security Amendments of 1983, section 2355
26 of the federal Deficit Reduction Act of 1984, or section 9412(b)
27 of the federal Omnibus Budget Reconciliation Act of 1986, that
28 is advertised, marketed, or designed primarily as a supplement
29 to reimbursements under Medicare for hospital, medical, or
30 surgical expenses of individuals covered by Medicare. "Medicare
31 supplement policy" does not include Medicare advantage plans,
32 outpatient prescription drug plans established under Medicare
33 part D, or any health care prepayment plan that provides benefits
34 pursuant to an agreement under section 1833(a)(1)(A) of the
35 federal Social Security Act.

1 2. Beginning January 1, 2026, applicants shall have an annual
2 thirty-one-day open enrollment period that begins on March 1.

3 3. During the open enrollment period under subsection 2, an
4 issuer shall be prohibited from doing any of the following for
5 at least one Medicare supplement policy or certificate that the
6 issuer offers and that is available for issuance in the state:

7 a. Denying or conditioning the issuance or effectiveness of
8 the Medicare supplement policy or certificate.

9 b. Subjecting an applicant to medical underwriting, or
10 discriminating in the pricing of the Medicare supplement policy
11 or certificate because of the applicant's health status, claims
12 experience, receipt of health care, or medical condition.

13 c. Imposing an exclusion of benefits based on an applicant's
14 preexisting condition.

15 4. An issuer shall provide notice, in a form prescribed by
16 the commissioner of insurance, of the annual open enrollment
17 period at the time an applicant applies for a Medicare supplement
18 policy or certificate.

19 EXPLANATION

20 The inclusion of this explanation does not constitute agreement with
21 the explanation's substance by the members of the general assembly.

22 This bill relates to Medicare supplement policies and an
23 annual open enrollment period.

24 Beginning January 1, 2026, applicants shall have an annual
25 31-day open enrollment period that begins on March 1.

26 "Applicant" is defined in the bill as an individual who is a
27 covered person under an individual or group Medicare supplement
28 policy. "Applicant" includes an individual under the age of 65
29 who qualifies for Medicare due to disability, end-stage renal
30 disease, or exposure to an environmental hazard. "Medicare
31 supplement policy" is also defined in the bill.

32 During the open enrollment period, for at least one Medicare
33 supplement policy or certificate that the issuer offers and that
34 is available for issuance in the state, an issuer is prohibited
35 from denying or conditioning the issuance or effectiveness of

1 the Medicare supplement policy or certificate; from subjecting
2 an applicant to medical underwriting or discriminating in the
3 pricing of the Medicare supplement policy or certificate because
4 of the health status, claims experience, receipt of health
5 care, or medical condition of an applicant; and from imposing
6 an exclusion of benefits based on an applicant's preexisting
7 condition. An issuer shall provide notice, in a form prescribed
8 by the commissioner of insurance, of the annual open enrollment
9 period at the time an applicant applies for a Medicare supplement
10 policy or certificate. "Issuer" is defined in the bill.

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