



General Assembly

January Session, 2011

Committee Bill No. 5429

LCO No. 4257

04257HB05429HS_

Referred to Committee on Human Services

Introduced by:
(HS)

**AN ACT CONCERNING THE AVAILABILITY OF MEDICARE
SUPPLEMENT INSURANCE TO PERSONS ELIGIBLE FOR THE
QUALIFIED MEDICARE BENEFICIARY PROGRAM.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 38a-495 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective from passage*):

3 (a) As used in this section, "Medicare" means the Health Insurance
4 for the Aged Act, Title XVIII of the Social Security Amendments of
5 1965, as amended (Title I, Part I of P.L. 89-97); "Medicare supplement
6 policy" means any individual health insurance policy delivered or
7 issued for delivery to any resident of the state who is eligible for
8 Medicare, except any long-term care policy as defined in section 38a-
9 501.

10 (b) No insurance company, fraternal benefit society, hospital service
11 corporation, medical service corporation or health care center may
12 deliver or issue for delivery any Medicare supplement policy which
13 has an anticipated loss ratio of less than sixty-five per cent for any
14 individual Medicare supplement policy defined in Section 1882(g) of

15 Title XVIII of the Social Security Act, 42 USC 1395ss(g), as amended.
16 No such company, society or corporation may deliver or issue for
17 delivery any Medicare supplement policy without providing, at the
18 time of solicitation or application for the purchase or sale of such
19 coverage, full and fair disclosure of any coverage supplementing or
20 duplicating Medicare benefits.

21 (c) Each Medicare supplement policy shall provide coverage for
22 home health aide services for each individual covered under the policy
23 when such services are not paid for by Medicare, provided (1) such
24 services are provided by a certified home health aide employed by a
25 home health care agency licensed pursuant to sections 19a-490 to 19a-
26 503, inclusive, and (2) the individual's physician has certified, in
27 writing, that such services are medically necessary. The policy shall
28 not be required to provide benefits in excess of five hundred dollars
29 per year for such services. No deductible or coinsurance provisions
30 may be applicable to such benefits. If two or more Medicare
31 supplement policies are issued to the same individual by the same
32 insurer, such coverage for home health aide services shall be included
33 in only one such policy. Notwithstanding the provisions of subsection
34 [(g)] (h) of this section, the provisions of this subsection shall apply
35 with respect to any Medicare supplement policy delivered, issued for
36 delivery, continued or renewed in this state on or after October 1, 1986.

37 (d) Whenever a Medicare supplement policy provides coverage for
38 the cost of prescription drugs prescribed after the hospitalization of the
39 insured, outpatient surgical procedures performed on the insured in
40 any licensed hospital shall constitute "hospitalization" for purposes of
41 such prescription drug coverage in such policy.

42 (e) Notwithstanding the provisions of subsection [(g)] (h) of this
43 section, each Medicare supplement policy delivered, issued for
44 delivery, continued or renewed in this state on or after October 1, 1988,
45 shall provide benefits, to any woman covered under the policy, for
46 mammographic examinations every year, or more frequently if

47 recommended by the woman's physician, when such examinations are
48 not paid for by Medicare.

49 (f) A Qualified Medicare Beneficiary may purchase a Medicare
50 supplement policy or change Medicare supplement policy plans, as
51 permitted by federal law.

52 [(f)] (g) The Insurance Commissioner shall adopt such regulations as
53 he deems necessary in accordance with chapter 54 to carry out the
54 purposes of this section.

55 [(g)] (h) The provisions of this section shall apply with respect to
56 any Medicare supplement policy delivered, issued for delivery,
57 continued or renewed in this state on or after October 1, 1987, and
58 prior to the effective date of any regulations adopted pursuant to
59 section 38a-495a.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	38a-495

Statement of Purpose:

To allow Medicare participants to access supplemental insurance plans.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

Co-Sponsors: REP. LUXENBERG, 12th Dist.; REP. THOMPSON, 13th Dist.
REP. HURLBURT, 53rd Dist.

H.B. 5429