The State of New Hampshire
Insurance Department
21 South Fruit Street, Suite 14
Concord, NH 03301

Roger A. Sevigny
Commissioner

Alexander K. Feldvebel
Deputy Commissioner

BULLETIN

Docket Number: INS No. 05-048-AB

TO: All Companies Licensed to Sell Health Insurance

FROM: Roger A. Sevigny

DATE: November 17, 2005

RE: Ins 1905.10
Medicare Supplement Product

The New Hampshire Insurance Department has received inquiries concerning open enrollment in a Medicare Supplement product for those persons under age 65 on Medicare due to disability. By law, each Medicare supplement policy and certificate that is presently available from a carrier must be made available to all applicants who qualify for the product under Ins. 1905.10 without regard to age.

A carrier may not deny or condition the issuance or effectiveness of a Medicare Supplement policy or certificate or discriminate in the pricing of the policy or certificate due to health status, or claim experience of the applicant, provided that the application for a policy is submitted before or during the 6 month period beginning on the first day of the first month in which an individual is enrolled for benefits under Medicare Part B.

Carriers that issue Medicare supplement policies shall submit an annual filing of their premium rates for Medicare supplement policies to the New Hampshire Insurance Department. The filing shall be submitted no later than November 1 preceding the calendar year effective period for which the rates are to be effective. All carriers shall use the calendar year as the rate effective period applicable to medicare supplement rates. All filings shall be accompanied by supporting documentation that shows the specific monthly premium rates applicable to New Hampshire purchasers during the open enrollment period. This documentation should specify whether the rates are issue age based or attained age based, the relevant provisions related to preexisting conditions, and the name, address and toll-free number for use by NH consumers of the carrier.