

1 A bill to be entitled
 2 An act relating to Medicare supplement policies; amending
 3 s. 627.671, F.S.; revising a short title; amending s.
 4 627.6741, F.S.; requiring that insurers issuing Medicare
 5 supplement policies in this state offer the opportunity to
 6 enroll in a Medicare supplement policy to certain
 7 individuals having a disability or end-stage renal
 8 disease; permitting insurers offering Medicare supplement
 9 policies to effect a one-time rate schedule change;
 10 authorizing insurers to propose a rate adjustment that
 11 considers the experience of policies or certificates for
 12 persons younger than 65 years of age; establishing
 13 credibility criteria for the rate adjustment; providing an
 14 effective date.

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 16 Be It Enacted by the Legislature of the State of Florida:

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 18 Section 1. Section 627.671, Florida Statutes, is amended
 19 to read:

20 627.671 Medicare supplement reform; short title.--Sections
 21 627.671-627.675 may be cited as the "Alonzo Mourning Access to
 22 Care Act ~~Florida Medicare Supplement Reform Act.~~"

23 Section 2. Subsection (1) of section 627.6741, Florida
 24 Statutes, is amended to read:

25 627.6741 Issuance, cancellation, nonrenewal, and
 26 replacement.--

27 (1) (a) An insurer issuing Medicare supplement policies in
 28 this state shall offer the opportunity of enrolling in a

29 Medicare supplement policy, without conditioning the issuance or
30 effectiveness of the policy on, and without discriminating in
31 the price of the policy based on, the medical or health status
32 or receipt of health care by the individual:

33 1.(a) To any individual who is 65 years of age or older,
34 or under 65 years of age and eligible for Medicare by reason of
35 disability or end-stage renal disease, and who resides in this
36 state, upon the request of the individual during the 6-month
37 period beginning with the first month in which the individual
38 has attained 65 years of age and is enrolled in Medicare Part B,
39 or is eligible for Medicare by reason of a disability or end-
40 stage renal disease, and is enrolled in Medicare Part B; or

41 2.(b) To any individual who is 65 years of age or older,
42 or under 65 years of age and eligible for Medicare by reason of
43 a disability or end-stage renal disease, who ~~and~~ is enrolled in
44 Medicare Part B, and who resides in this state, upon the request
45 of the individual during the 2-month period following
46 termination of coverage under a group health insurance policy.

47 (b) The 6-month period to enroll in a Medicare supplement
48 policy for an individual who is under 65 years of age and is
49 eligible for Medicare by reason of disability or end-stage renal
50 disease and otherwise eligible under subparagraph (a)1. or
51 subparagraph (a)2. and first enrolled in Medicare Part B before
52 October 1, 2009, begins on October 1, 2009.

53 (c) A company that has offered Medicare supplement
54 policies to individuals under 65 years of age who are eligible
55 for Medicare by reason of disability or end-stage renal disease
56 before October 1, 2009, may, for one time only, effect a rate

57 schedule change that redefines the age bands of the premium
58 classes without activating the period of discontinuance required
59 by s. 627.410(6)(e)2.

60 (d) As a part of an insurer's rate filings, before and
61 including the insurer's first rate filing for a block of policy
62 forms in 2015, notwithstanding the provisions of s.
63 627.410(6)(e)3., an insurer shall consider the experience of the
64 policies or certificates for the premium classes including
65 individuals under 65 years of age and eligible for Medicare by
66 reason of disability or end-stage renal disease separately from
67 the balance of the block so as not to affect the other premium
68 classes. For filings in such time period only, credibility of
69 that experience shall be as follows: if a block of policy forms
70 has 1,250 or more policies or certificates in force in the age
71 band including ages under 65 years of age, full or 100 percent
72 credibility shall be given to the experience; and if fewer than
73 250 policies or certificates are in force, no or zero percent
74 credibility shall be given. Linear interpolation shall be used
75 for in-force amounts between the low and high values. Florida-
76 only experience shall be used if it is 100 percent credible. If
77 Florida-only experience is not 100 percent credible, a
78 combination of Florida-only and nationwide experience shall be
79 used. If Florida-only experience is zero percent credible,
80 nationwide experience shall be used. The insurer may file its
81 initial rates and any rate adjustment based upon the experience
82 of these policies or certificates or based upon expected claim
83 experience using experience data of the same company, other
84 companies in the same or other states, or using data publicly

85 available from the Centers for Medicaid and Medicare Services if
86 the insurer's combined Florida and nationwide experience is not
87 100 percent credible, separate from the balance of all other
88 Medicare supplement policies.

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90 A Medicare supplement policy issued to an individual under
91 subparagraph (a)1. or subparagraph (a)2. ~~paragraph (a) or~~
92 ~~paragraph (b)~~ may not exclude benefits based on a preexisting
93 condition if the individual has a continuous period of
94 creditable coverage, as defined in s. 627.6561(5), of at least 6
95 months as of the date of application for coverage.

96 Section 3. This act shall take effect October 1, 2009.