Access to Medigap Coverage: Challenges for Under and Over Age 65

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Presentation Overview

Challenges younger Medicare beneficiaries face once they become eligible for Medicare **and** beneficiaries of all ages have faced when trying to leave an MA plan and access a Medigap plan

Overview of federal requirements: December 2023 CMS update on adequacy guidance

Best practices for states to expand access to Medigap, examples of what states are pursuing; and how states can assist consumers on these issues

Access to Medigap Insurance for Medicare Beneficiaries:

Under Age 65

Access to Medigap Health Benefits

- No federal right to a Medigap until age 65
 - Discrimination based on age
 - At age 64 or younger (12% of Medicare population)
 - Disabled
 - With health conditions
 - Example of no discrimination based on age
 - Insured beneficiaries at age 80+
 - Protected by federal and state guaranteed issue events
 - Also likely to have existing health conditions

Medigap Access: State Variations

- Variations range from:
 - Same Medigap rights as age 65
 - Limited access
 - To certain Medigap plans
 - Higher premiums, some with certain limitations
 - Access through a state high risk pool
 - Some voluntary sales with health underwriting
 - In some states
 - No access until age 65 in some states
- o Nationally:
 - Only 2% of younger beneficiaries have a Medigap

State Availability Of Medigaps

o 3 states

- All Medigaps available to all Medicare beneficiaries
- Age and health pricing factors not permitted

5 states

- Same access as age 65
 - Premiums or other limitations exist

3 Medigap Waiver states

- Some Medigaps available
 - Some limitations exist

State Availability Of Medigaps

- 13 states and D.C.
 - Have no requirements for younger than 65
 - 7 states provide access to the state high risk pool
 - 1 state issues Medigap through their high risk pool
 - Some voluntary sales with health underwriting occur

1 state

 Year round access with no health or age restrictions

What Can The NAIC Do?

- Why are 3 states able to accept all risks?
 - What is the Medigap experience in those states?
 - Premium costs
 - Medical/claims experience
 - Loss ratio experience
 - Comparison to other states?
- NAIC could collect data to inform states and policymakers
 - What is the impact of state rules on:
 - 1. Access to Medigap
 - · Each population (age, gender, urban/rural)
 - 2. Medigap rates
 - All populations?
 - Over 65?
 - · Younger beneficiaries only?
 - Loss ratios
 - 4. State high risk pools
 - Medicaid/duals (65+, -64)
 - Insurer data
 - Health underwriting in voluntary markets
 - Pricing data

Access to Medigap Insurance for Medicare Beneficiaries:

Over Age 65 and Outside the 6 Month Federal Consumer Protection Window

<u>Snapshot: Medicare, Medicare Advantage, Supplemental Plans</u>

 2021 - 58 million people enrolled in both Medicare Part A and Part B, about half of all beneficiaries were covered under traditional Medicare (53%) and roughly half were enrolled in Medicare Advantage (MA) plans (47%) ¹

Enrollment in MA is growing

 2023 – Growth in MA Plans - 30.8 million people are enrolled in an MA plan, accounting for more than half, or 51 percent.²

Snapshot: Medicare, Medicare Advantage, Supplemental Plans (cont.)

Supplemental Plans (from 2021)

- Traditional Medicare 30.6 million people
- Traditional Medicare + Medigap 12.5M
 - Traditional Medicare + employer 9.7M
 - Traditional Medicare + Medicaid 5M
 - Traditional Medicare + other coverage 267K
 - Traditional Medicare with no other coverage 3.2M

Access to Medigap Health Benefits Age 65 ½ +

- Federal Medigap Law Protects Patients for 6 Months
- There is a one-time, 6-month open enrollment period that begins when beneficiaries first enroll in Medicare Part B.
- During this time, there is guaranteed issued.
 - Medigap insurers cannot deny a Medigap policy to any applicant based on factors such as age, gender, health status, or pre-existing medical conditions.
 - After this <u>6</u> month period, there is no federal protection. State laws decide consumer protections.³

Access to Medigap Health Benefits Age 65 ½ and Over

Outside Federal Medigap 6-Month Protections

- States can go beyond the minimum federal standards for Medigap.
- 4 States(CT, MA, ME, NY) require either continuous or annual guaranteed issue protections for Medigap for all beneficiaries in traditional Medicare ages 65 and older, regardless of medical history.
- 28 states require Medigap insurers to issue policies to eligible Medicare beneficiaries whose employer has changed their retiree health coverage benefits.
- In other states, people may be denied a Medigap plan when they switch form an MA plan to traditional Medicare because they have a pre-existing condition.⁴

Medicare Advantage (MA): Challenges

- Provider Directory Inaccuracy⁵
- Inadequate Provider and Facility Network Standards
- Prior Authorizations/Delay or Denial of Care
- 50% of beneficiaries leave their current plan within 5 years⁶
- Beneficiaries feel Stuck⁷
 - Changing MA Plans
 - No Medigap Options

Federal Guidance and Initiatives to Improve MA

- Network Adequacy Standards⁸ New Guidance Updated December 2023
 - Dialysis Centers are still not included in MA network adequacy standards
- Prior Authorization Improvement Plan⁹ Released January of 2024
 - Will go into affect in 2027
- U.S. Senate Finance Committee Hearings/Letters on Deceptive Marketing

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