PUBLIC PROTECTION CABINET
Kentucky Department of Insurance
500 Mero Street, 2SE11
Frankfort, KY 40601
Phone: (502) 564-3630
Toll Free: (800) 595-6053

Andy Beshear
GOVERNOR

Jacqueline Coleman
LIEUTENANT GOVERNOR

Ray A. Perry
SECRETARY

DJ Wasson
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Sharon P. Clark
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MEDICARE SUPPLEMENT UPDATE CONSUMER ALERT
The "Birthday Rule" and Enrollment Changes Effective January 1, 2024

In 2023, the Kentucky Legislature passed a new law, KRS 304.14-525 (2023 Regular Session House Bill 345, Chapter 182, Acts of the General Assembly), which became effective January 1, 2024. The law applies to all Medicare Supplement policies, including group association plans and closed blocks that are available, issued, or renewed on or after January 1, 2024. It provides new open enrollment periods and an annual guaranteed issue period referred to as the "Birthday Rule."

What is the new Open Enrollment Period for people under age sixty-five who are newly eligible to Medicare?

Prior to January 1, 2024, the only Open Enrollment for Medicare Supplement policies available was a six-month period beginning on the first day of the month an individual turned sixty-five (or older) and was enrolled in Medicare Part B. As of January 1, 2024, anyone becoming eligible for Medicare *under* age sixty-five will also have a six-month open enrollment period for all Medicare Supplement policies, beginning on the first day of the month they enroll into Medicare Part B.

What about individuals under age sixty-five who were enrolled in Medicare prior to January 1, 2024?

There is a one-time, six-month Medicare Supplement open enrollment for anyone currently on Medicare under age sixty-five (65) prior to January 1, 2024. This open enrollment period began on January 1, 2024, and will run through June 30, 2024.

Will people under age sixty-five receive a traditional open enrollment period when they turn sixty-five?

Yes. The traditional open enrollment period for those who become eligible after reaching age sixty-five will still apply. This means some individuals will receive a second open enrollment period when they reach the age of sixty-five.

What is the Birthday Rule?

The Birthday Rule requires companies to provide "guaranteed issue" rights, once a year, to applicants who apply for the same Plan they are currently enrolled in, but with a different insurer. The application must be submitted within sixty (60) days after their birthday. This is a Plan for Plan replacement only (e.g., G to G) and is not contingent on age.

What does Plan to Plan mean?

"Plan to Plan" includes all variations of that lettered Plan. For example, an individual enrolled in an innovative or "Select" Plan would be able to utilize the new Birthday Rule to switch to a cheaper standard Plan without innovative benefits or "Select" requirements at guaranteed issue.

What is the difference between Open Enrollment and Guaranteed Issue?

The only difference is the time frame. There is a six-month period for open enrollment and a sixty (60)-day period related to your birthday, for guaranteed issue. During both of these periods an insurer is prohibited from performing underwriting, meaning the insurance company cannot request any health or medical information, including, height and weight, tobacco use, or prescription drug history.

If you are being pressured to make a change, have been given inaccurate information, or if you have questions, please contact the Kentucky Department of Insurance, Senior Health Insurance Products Branch, Phone (502) 564-6088; TTY (800) 648-6056; Email: DOI.SeniorHealthProducts@ky.gov; or visit Insurance.ky.gov for more information.

For one-on-one counseling or assistance, you can contact the State Health Insurance Assistance Program (SHIP) at (877) 293-7447 or (502) 564-6930.