Medigap Guaranteed Issue vs. Non-Guaranteed Issue and Guaranteed Acceptance

GUARANTEED ISSUE

Certain situations allow a beneficiary to enroll in a Medigap Plan with no medical underwriting. Criteria includes:

- Enrolled in Medicare Part B less than six months and is 65 or older.
- Enrolled in a Medicare Advantage plan and the plan leaves the area the person lives in, or the person moves out of the plan service area.
- Enrolled in an employer group plan or COBRA and the plan is ending.
- Enrolled in original Medicare and Medicare SELECT policy and they move out of the Medicare SELECT service area.
- Joined a Medicare Advantage plan when they were first eligible for Part A at age 65 and within the first year, they decide they want to switch back to Original Medicare
- Dropped a Medigap policy to join a Medicare Advantage plan (or switch to Medicare SELECT) for the first time, been in a plan less than a year, and wants to switch back.

NON-GUARANTEED ISSUE

When a member does not fall into any of the guaranteed issue criteria, they will be medically underwritten.

- Carriers will look age, gender, and zip code, plus tobacco usage, health status, and drug utilization to determine a rating tier for that member.
- Health status will be used to determine the member premium and agent commission tier.
- Carriers may deny issuing a policy. BCBSM is an exception - they offer **GUARANTEED ACCEPTANCE**. Everyone is accepted. They will experience a rate increase, but they will not be denied a policy.