

As Introduced

135th General Assembly

Regular Session

2023-2024

H. B. No. 400

Representatives Callender, Sweeney

**Cosponsors: Representatives Baker, Isaacsohn, Brown, Denson, Carruthers,
Brennan, Seitz, Piccolantonio, Rogers, Abrams, Thomas, C.**

A BILL

To amend section 3923.33 and to enact section 1
3923.3310 of the Revised Code to provide Medigap 2
policies for Medicare-eligible individuals under 3
the age of 65. 4

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That section 3923.33 be amended and section 5
3923.3310 of the Revised Code be enacted to read as follows: 6

Sec. 3923.33. As used in section 3923.33 and sections 7
3923.331 to ~~3923.339~~ 3923.3310 of the Revised Code: 8

(A) "Applicant" means: 9

(1) In the case of an individual medicare supplement 10
policy, the person who seeks to contract for insurance benefits; 11
and 12

(2) In the case of a group medicare supplement policy, the 13
proposed certificate holder. 14

(B) "Certificate" means, for purposes of section 3923.33 15
and sections 3923.331 to 3923.339 of the Revised Code, any 16

certificate delivered or issued for delivery in this state under 17
a group medicare supplement policy. 18

(C) "Certificate form" means the form on which the 19
certificate is delivered or issued for delivery by the issuer. 20

(D) "Direct response insurance policy" means a medicare 21
supplement policy or certificate marketed without the direct 22
involvement of an insurance agent. 23

(E) "Issuer" includes insurance companies, fraternal 24
benefit societies, health insuring corporations, and any other 25
entities delivering or issuing for delivery in this state 26
medicare supplement policies or certificates. 27

(F) "Medicare" means the "Health Insurance for the Aged 28
Act," Title XVIII of the Social Security Amendments of 1965, 79 29
Stat. 291, 42 U.S.C.A. 1395, as then constituted or later 30
amended. 31

(G) "Medicare supplement policy" means a group or 32
individual policy of sickness and accident insurance or a 33
subscriber contract of health insuring corporations or any other 34
issuers, other than a policy issued pursuant to a contract under 35
section 1876 of the "Social Security Act," 49 Stat. 620 (1935), 36
42 U.S.C.A., 1395mm, as amended, or an issued policy under any 37
demonstration project specified in 42 U.S.C.A. 1395ss(g)(1), 38
which is advertised, marketed, or designed primarily as a 39
supplement to reimbursements under medicare for the hospital, 40
medical, or surgical expenses of persons eligible for medicare. 41

(H) "Policy form" means the form on which the policy is 42
delivered or issued for delivery by the issuer. 43

Sec. 3923.3310. (A) On and after January 1, 2025, any 44
issuer that offers coverage under a medicare supplement plan to 45

individuals sixty-five years of age or older shall offer the 46
same coverage to individuals younger than sixty-five years of 47
age who are eligible for and enrolled in medicare by reason of 48
disability or end stage renal disease. 49

(B) Any benefit, protection, policy, or procedure 50
applicable to coverage under a plan for an individual sixty-five 51
years or older shall also apply to coverage offered under this 52
section. 53

(C) The premiums for coverage offered under this section 54
to individuals who are sixty-four years of age or younger shall 55
not be higher than the premiums for a medicare supplement plan 56
offered to individuals sixty-five years of age. 57

(D) (1) Except as otherwise provided in division (D) (2) of 58
this section, an issuer shall comply with sections 3923.33 to 59
3923.339 of the Revised Code when issuing policies under this 60
section. 61

(2) Notwithstanding any provision of the Revised Code to 62
the contrary, a policy issued under this section shall not 63
exclude or limit benefits for losses attributable to a 64
preexisting condition. 65

(E) An issuer shall offer to individuals younger than 66
sixty-five years of age who are eligible for and enrolled in 67
medicare by reason of disability or end stage renal disease an 68
open enrollment period for coverage offered under this section 69
that begins January 1, 2025, and ends July 1, 2025. 70

(F) Each year, a person who is already covered under a 71
policy issued under this section may, within sixty days of the 72
person's date of birth, acquire a new medicare supplement policy 73
offering the same coverage as the person's existing policy from 74

a different issuer. 75

Section 2. That existing section 3923.33 of the Revised 76
Code is hereby repealed. 77