

SENIOR ISSUES (B) TASK FORCE

The mission of the Senior Issues (B) Task Force is to consider policy issues, develop appropriate regulatory standards and revise the NAIC models, consumer guides and training material, as necessary, on Medicare supplement insurance, senior counseling programs and other insurance issues which affect older Americans.

Ongoing Maintenance of NAIC Programs, Products and Services

1. Review model laws adopted in 2004 and recommend whether they be retained, revised or deleted. Report by 2009 Winter National Meeting; *Essential*
2. Continue to monitor and work with federal agencies to advance appropriate regulatory standards for Medicare Supplement and other forms of health insurance applicable to older Americans. Report quarterly; *Essential*
3. Review the Medicare Supplement Insurance Minimum Standards Model Act and Regulation to determine if amendments are required based on changes to federal law and revise if necessary. Report by 2009 Winter National Meeting; *Essential*
4. Monitor the Medicare Advantage and Medicare Part D marketplace, assist the states as necessary with regulatory issues, and maintain a dialogue and coordinate with CMS on regulatory issues, including solvency oversight of waived plans and agent misconduct. Report quarterly. *Essential*
5. Monitor and assist states in the implementation of changes to the Model Regulation to Implement the NAIC Medicare Supplement Insurance Minimum Standards Model Act to modernize the Medicare supplement market, as approved by the NAIC in March 2007 as required by the Medicare Improvement for Patients and Providers Act of 2008 and the Genetic Information Nondiscrimination Act of 2008. Report quarterly; *Essential*
6. Continue to monitor the changes in the Medicare Supplement insurance market and assist states with implementation of Medicare Supplement Model amendments due to federal statutory changes. Report quarterly; *Essential*
7. Provide the perspective of state insurance commissioners to the U.S. Congress, as appropriate, and the Centers for Medicare & Medicaid Services of the U.S. Department of Health and Human Services on insurance issues, including concerning the effect and result of federal activity on the senior citizen health insurance marketplace and regulatory scheme; *Essential*
8. Work with the Centers for Medicare & Medicaid Services to revise the annual joint publication, *Guide to Health Insurance for People with Medicare*; *Essential*

- ~~9. Amend the NAIC Long Term Care Insurance Model Act and Regulation for independent external review for claim denials based upon failure to meet the ADL, cognitive impairment or medical necessity test. Report on progress quarterly and complete by December, 2009; *Essential*~~
- ~~109.~~ Monitor information on legislation impacting the funding of State Health Insurance Assistance Programs (SHIP). Report quarterly; *Important*
- ~~110.~~ Assist the states and serve as clearinghouse for information on Medicare Advantage plan activity. Report quarterly; *Important*
- ~~121.~~ In accordance with changes to the Model Regulation to Implement the NAIC Medicare Supplement Insurance Minimum Standards Model Act approved by the NAIC in March 2007, monitor and maintain a record of state approvals of all Medicare supplement insurance new or innovative benefits for use by regulators and others. *Important*
- ~~132.~~ In accordance with changes to the Model Regulation to Implement the NAIC Medicare Supplement Insurance Minimum Standards Model Act approved by the NAIC in March 2007, periodically review state-approved new or innovative benefits and consider whether to recommend that they be made part of standard benefit plan designs in the model regulation. *Important*
- ~~143.~~ Review preferred provider arrangements with Medicare supplement policies and determine their legality and their effect on Medicare supplement standardization. Take appropriate action, as necessary. *Important*