



**STATE OF WISCONSIN  
BOARD ON AGING AND LONG TERM CARE**

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<http://longtermcare.wi.gov>

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**Wisconsin Medicare Supplement Policy Purchase Protections**

Thank you for contacting the State of Wisconsin Medigap Helpline or Medigap Prescription Drug Helpline. These helplines are a part of the Wisconsin State Health Insurance Assistance Program (SHIP), and our number can be found on the back of the Wisconsin Medicare and You Book. Counseling and resources are available for beneficiaries with any Medicare-related questions.

Several Wisconsin Medicare Supplement policy purchase protections are available to qualifying beneficiaries in Wisconsin. The protections below (*Open Enrollment Period & Guaranteed Issue*) give beneficiaries the right to purchase a Medicare Supplement policy without health underwriting and the insurer must sell them a policy if available at the preferred rate. These protections include but are not limited to the Medicare Supplement open enrollment period, Medicare Supplement guarantee issue, and pre-existing condition waiting periods that can be avoided through proof of creditable coverage. These protections are outlined below.

**Medicare Supplement Open Enrollment Period:**

This period lasts for 6 months following a beneficiary's enrollment date in Medicare Part B. During this period, insurance companies may not deny or condition the issuance of a Medicare Supplement policy based on a beneficiary's health status, claims experience, receipt of healthcare, or medical condition and may not charge them an additional premium because of your use of tobacco. The policy may still have waiting periods before preexisting health conditions are covered (see pre-existing condition waiting period below).

If a beneficiary is under age 65 and enrolled in Medicare due to disability or end-stage renal disease, they are entitled to another six-month open enrollment period upon reaching age 65

**Medicare Supplement Guarantee Issue:**

In addition to the open enrollment period, in some situations, beneficiaries have the right to enroll in a Medicare Supplement policy regardless of their health status if your other health coverage terminates. These periods are referred to as Medicare Supplement guarantee issue periods.

A guaranteed issue period may be triggered by one of the following events:

- The Medicare Advantage plan a beneficiary is enrolled in terminates in the enrollee's plan area (County).
- A beneficiary is eligible for Medicare Parts A and B and covered under a Wisconsin Medical Assistance program and lose eligibility for Medical Assistance.
- A beneficiary relocates outside of the service area of a Medicare Advantage plan.
- A beneficiary's employer group health plan ends some or all of its coverage.
- A beneficiary's employer group plan increases premium costs from one 12-month period the next by more than 25% and the new premium payment for coverage is greater than a premium charged under a Medicare Supplement policy that is being applied for.
- A beneficiary is within a Medicare Advantage trial period.

*Note: There are more Guaranteed Issue periods than are listed above. Specific requirements need to be met to qualify for a Guaranteed Issue period, refer to Wisconsin Administrative Code for more information [Wis. Ins 3.39(34)(c)].*

*Link: [https://docs.legis.wisconsin.gov/code/admin\\_code/ins/3/39](https://docs.legis.wisconsin.gov/code/admin_code/ins/3/39)*

### **Medicare Supplement Pre-Existing Condition Waiting Period:**

A pre-existing condition waiting period is the length of time a beneficiary must be covered by a Medicare Supplement policy before the policy will begin to pay claims for any health condition the insurer determines to be pre-existing. Medicare supplement policies may impose up to a 180-day waiting period before coverage for the condition begins under the policy.

Insurers are required to waive any waiting periods for preexisting conditions if a beneficiary buys a Medicare Supplement policy during the open enrollment period and have been continuously covered with creditable coverage for at least six months before applying for the Medicare Supplement policy. Insurers are also required to waive any waiting periods for preexisting conditions when one Medicare Supplement policy is replaced with another.

If you need any additional counseling or resources, contact us again at either of the numbers below. In your message please be sure to include your name, address, call back number, email address (if available), and reason for your call. A counselor will contact you using the information you provide.

**Medigap Helpline: (800) 242-1060**

**Medigap Part D & Prescription Drug Helpline: (855) 677-2783**

Thank You,

Medigap Helpline Services  
State of Wisconsin Board on Aging and Long Term Care

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