FINAL

MEETING OF THE NEW JERSEY UNDER 50 MEDICARE SUPPLEMENT PROGRAM BOARD

September 15, 2020

Board Members:

Present – Aetna (HMO) – Jennifer Foster

Present – UHC (Med Supp writer) – Steve Kane (Chair)

Present - Horizon (Contracting Carrier) - Sandi Kelly

Absent – Transamerica (Med Supp writer) – Moshe Nelkin

Present – Public Rep – Ron Ouellette

Present – Public Rep – Pat Walsh

Present – DOBI Rep – Seong-Min Eom

Vacant – AHIP Rep

Staff Present:

Ellen DeRosa, Executive Director, IHC/SEH Programs Chanell McDevitt, Deputy Ex. Dir., IHC/SEH Programs Rosaria Lenox, Managing Financial Officer, IHC/SEH Programs

I. Call to order

The meeting was called to order at 1:30 P.M. The meeting was held by conference call.

II. Reinstatement of a Specific Member

E. DeRosa noted that the meeting was being called because Horizon wants the Board to consider the requested reinstatement of an MSU50 member. E. DeRosa reiterated the facts of the situation as they had been presented thus far:

- The member had been covered under Medicare Supplement Plan C through the MSU50 Program for many years prior to termination, but will not be eligible for a guaranteed-issue Medicare Supplement plan due to age for many years to come.
- The member received premium assistance from the American Kidney Fund (AKF), which has an income-based premium assistance program.
- The member's premium was billed on a quarterly basis, the last quarter for which an invoice was sent being for the three-month period of December 2019, and January and February 2020.
- AFK paid premiums for December 2019, but not January and February 2020. Upon investigation, AKF advised of its new calendar-year based policy that precludes payment of premium crossing into a new calendar year period.
- A separate invoice for January and February 2020 was requested, and issued. However, AKF indicated it would not make payment because the re-issued invoice did not state the dates of service for the premium specified.
- In March, the member's caseworker at the dialysis center suggested the member contact Horizon to request reinstatement, as well as an invoice for January and February 2020

showing the dates of service for which premiums were due. There is no evidence a call was made to Horizon making these requests.

- In April, while the member's caseworker was on temporary leave, another caseworker at the dialysis center called Horizon to request the revised invoice. Horizon issued the invoice, but the member indicated it was not received.
- On June 10, following the return of the member's caseworker from leave, the caseworker with the member on the line called Horizon and asked for a reinstatement, which Horizon declined to approve.
- On June 25, the caseworker appealed the reinstatement denial.

Several additional facts were noted during discussions at the meeting:

- Horizon sends invoices to members, regardless of whether a third party is making payment.
- The dialysis center assisted the member with securing premium assistance from the AKF; however, it is not known how the invoices were transmitted from the member to the AKF.
- The grace period for the quarterly payment in question ended December 31, 2019. Horizon, in accordance with its normal procedure, sent a reminder notice on December 20, 2019, stating the amount past due. It then issued a notice of termination to the member dated January 3 for failure to pay all amounts due by December 31, 2019.
- The version of the AKF handbook in effect when the payment in question was due did not indicate that premiums across calendar years would not be paid, or a requirement that the date of service be on the invoice to secure payment.
- Horizon grants reinstatements, subject to certain conditions.
 - The member had been terminated and reinstated twice before, but far enough in the past that the prior terminations would not be considered with respect to the current reinstatement.
 - A request for a reinstatement presented on or after March 3 more than 60 days subsequent to the current termination would have been untimely in accordance with Horizon's criteria.
- Horizon searched its customer service call logs, and acknowledged receiving calls from or about the member (some calls may have been made by the member's parent), or from the caseworker in March, April and June. However, the logs indicate that the first call during which reinstatement was requested did not occur until June 2020.
- Claims for the member are substantially related to kidney failure and dialysis services, and are relatively low.

Horizon sought direction from the Board. During discussion, it was acknowledged that there is no certainty that the AKF would make payments for coverage back to January. Further, while some members of the Board indicated a willingness to consider the reinstatement, Board members questioned what the member's treatment status has been since termination of Plan C coverage. Mary McGeary, from SHIP, stated that she would reach out to the caseworker to obtain additional information. S. Kelly stated she would research additional information through Horizon.

III. Close of Meeting

The meeting adjourned at 2:20 P.M.