

Proof of credible coverage requirements

Guaranteed Issue (GI) applications must be submitted with the required credible coverage documentation. Federal and state guidelines outline eligibility for GI applications. Please consult the Department of Insurance for qualifying events in an applicant's state.

Qualifying event	Documentation required
Involuntary loss of own group coverage	Termination letter or credible coverage on provider letterhead – should include applicant name and dates of coverage
Involuntary loss of dependent group coverage	Same as above, but if individual not named on letter, will also require ID (benefit) card
Medicare Advantage plan leaving area	Notice of termination from provider – should include applicant name and date coverage will end
Medicare Advantage plan stops providing care	Notice of termination from provider – should include applicant name and date coverage will end
Applicant moves out of the service area	One of the following: Notice of termination letter (preferred), copy of utility bill or driver's license with old address
Prior Medicare Supplement coverage went to Medicare Advantage plan and dis-enrolled within 12 months	1) Proof of Medicare Supplement: schedule page, copy of original application or copy of ID card 2) Proof of Medicare Advantage Plan: Medicare Advantage ID card, copy of cancellation request letter from applicant to Medicare Advantage carrier
Initial trial right period	One of the following: Copy of Medicare Advantage plan ID card, schedule page, original application for coverage, handwritten letter requesting cancellation
Missouri anniversary rule	Copy of current Medicare Supplement card with schedule page; must include plan and anniversary date
Oregon/California birthday rule	Copy of current Medicare Supplement card; must include plan
Loss of Medicaid (GI eligibility is only available in the following states: KS, ME, OR, TN, TX, UT, WI, MT)	Copy of Medicaid termination letter – should include applicant name and date coverage will end
Involuntary or Voluntary Loss of COBRA	Copy of proof that applicant was on COBRA or just came off of COBRA. Proof must include name and end date.



Senior Supplemental Insurance