



MISSOURI SENATE

JEFFERSON CITY

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Sen. Kevin Engler Adds Senior Healthcare Protection to Senate Bill

JEFFERSON CITY – Seniors will now have time to make an informed decision when signing up for a Medicare replacement plan without being pressured by insurance agents to make an immediate decision. Sen. Kevin Engler, R-Farmington, today introduced an amendment to Senate Bill 973, a healthcare reform package, that would require a waiting period before Medicare recipients are enrolled in a Medicare Advantage plan and also that they are given a list of healthcare providers in the area that are covered by the plan. These plans are part of the Medicare system, and often provide extra benefits and lower co-payments compared to original Medicare plans. The Department of Insurance, Financial Institutions, and Professional Registration, however, has received numerous complaints about these plans after seniors purchase them and then find they are no longer able to see their regular doctor.

“Insurance agents are selling these plans in a legitimate way, but the problem is that many of these consumers are finding that their personal doctors aren’t covered,” said Sen. Engler. “This would make sure that consumers have the time and the information to make sure this decision is right for them.”

The amendment, which is also contained in SB 973, a bill sponsored by Engler and Sen. Wes Shoemaker (D-Clarence) requires a two day period between the time when a Medicare recipient is approached and when they are enrolled in a Medicare Advantage plan. The agent will also need the consumer to sign a disclosure statement saying that these plans are not supplement plans, advising the applicant to confirm with his or her health care providers whether or not the provider is included in the plan, and advising the applicant to contact either a trusted friend, family member, or the state health insurance assistance program.

“Seniors can benefit from these plans, but they aren’t for everybody” said Sen. Engler. “They can be extremely dangerous in rural areas where providers are already few and far between and some of them are not covered by these plans.”

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