

# HOUSE BILL No. 1226

---

## DIGEST OF INTRODUCED BILL

**Citations Affected:** IC 27-8-13-9.3.

**Synopsis:** Medicare supplement insurance. Prohibits an issuer of a Medicare supplement policy or certificate from denying, conditioning the issuance or effectiveness of, or discriminating in the pricing of a Medicare supplement policy or certificate because of the health status, claims experience, receipt of health care, or medical condition of an applicant who meets certain conditions.

**Effective:** January 1, 2026.

---

---

## Dant Chesser, Clere

---

---

January 9, 2025, read first time and referred to Committee on Insurance.

---

---



First Regular Session of the 124th General Assembly (2025)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2024 Regular Session of the General Assembly.

# HOUSE BILL No. 1226

A BILL FOR AN ACT to amend the Indiana Code concerning insurance.

*Be it enacted by the General Assembly of the State of Indiana:*

1 SECTION 1. IC 27-8-13-9.3 IS ADDED TO THE INDIANA CODE  
2 AS A **NEW** SECTION TO READ AS FOLLOWS [EFFECTIVE  
3 JANUARY 1, 2026]: **Sec. 9.3. (a) This section applies to a Medicare  
4 supplement policy or certificate delivered, issued, or renewed on or  
5 after January 1, 2026.**  
6 **(b) This section applies to either:**  
7 **(1) an applicant who submits an application for a Medicare  
8 supplement policy or certificate before or during the six (6)  
9 month period beginning on the first day of the first month  
10 during which the applicant is:**  
11 **(A) at least sixty-five (65) years of age; and**  
12 **(B) timely enrolled for benefits under Medicare Part B  
13 without penalty under federal law; or**  
14 **(2) an applicant who:**  
15 **(A) is insured under a Medicare supplement policy or  
16 certificate;**  
17 **(B) submits an application for a Medicare supplement**



- 1                   **policy or certificate:**  
2                    **(i) to an issuer that is different than the issuer of the**  
3                    **applicant's current Medicare supplement policy or**  
4                    **certificate; and**  
5                    **(ii) within sixty (60) days of the applicant's birthday; and**  
6                    **(C) seeks to maintain the same type of lettered Medicare**  
7                    **supplement plan, including any variation of the lettered**  
8                    **plan.**
- 9                    **(c) An issuer of a Medicare supplement policy or certificate**  
10                   **shall not deny, condition the issuance or effectiveness of, or**  
11                   **discriminate in the pricing of a Medicare supplement policy or**  
12                   **certificate because of the health status, claims experience, receipt**  
13                   **of health care, or medical condition of an applicant to which**  
14                   **subsection (b) applies.**
- 15                   **(d) A new Medicare supplement policy or certificate issued to an**  
16                   **applicant under subsection (b)(2) must go into effect on the first**  
17                   **day of the month that is at least thirty (30) days after the signature**  
18                   **date on the application for the Medicare supplement policy or**  
19                   **certificate.**

