



GUARANTEED ISSUE

What is guaranteed availability?

Beginning with the first health insurance plan year on or after January 1, 2014, health insurers must accept every individual and employer that applies for health care coverage.

This provision applies to non-grandfathered fully insured individual, small group and large group health insurance coverage.

Issuers must offer all products that are approved for sale, including non-grandfathered closed blocks of business. This means insurers must offer insurance coverage under a health plan that was previously closed and not available to new membership.

Effective July 16, 2014, guaranteed availability no longer applies to insured health plans issued in the U.S. territories (Puerto Rico, the U.S. Virgin Islands, Guam, American Samoa and the Northern Mariana Islands).

What is guaranteed renewability?

Beginning with the first health plan year on or after January 1, 2014, health insurers must renew all insurance coverage in the individual and group market if the individual or group chooses to renew.

This provision applies to non-grandfathered fully insured individual, small group and large group coverage. The only exceptions to this rule are situations such as non-payment of premium or fraud.

Guaranteed renewability already applies to all group plans (including self-insured and grandfathered plans) under the 2001 Health Insurance Portability and Accountability Act (HIPAA) requirements.

Effective July 16, 2014, guaranteed renewability no longer applies to insured plans issued in the U.S. territories (Puerto Rico, the U.S. Virgin Islands, Guam, American Samoa and the Northern Mariana Islands).