



Multiple Medicare Supplement Policy/Certificate In Force Reporting

31 Pa. Code s 89.788 states,

(a) On or before March 1 of each year, an issuer shall report the following information for every individual resident of this Commonwealth for which the issuer has in force more than one Medicare supplement policy or certificate. This information must only be submitted for those issuers having insureds with more than one policy:

(1) The policy and certificate number.

(2) The date of issuance.

(b) The items in subsection (a) shall be grouped by individual policyholder.

Below is a copy of the form located at 31 PA Code Section 89 Appendix F.

APPENDIX E

FORM FOR REPORTING MEDICARE SUPPLEMENT POLICIES

Company Name: _____

Address: _____

Phone Number: _____

Due: March 1, annually

The purpose of this form is to report the following information on each resident of this state who has in force more than one Medicare supplement policy or certificate. The information is to be grouped by individual policyholder.

Policy and Certificate #

Date of Issuance

Signature

Name and Title (please type)

Date