

10.3 - Optional Supplemental Benefits

(Rev. 77, Issued: 10-28-05, Effective Date: 10-28-05)

In addition to offering a basic benefit package (that is, Medicare-covered benefits), each *Medicare cost plan* may offer (for election by the enrollee and without regard to health status) optional supplemental services or benefits - that is, services or benefits that are in addition to those included in the basic benefits. All optional supplemental benefits must

be offered for a period of at least 30 consecutive days to both new plan enrollees and to all current enrollees of a plan at least once a year.

Although a **Medicare cost plan** may limit the availability of optional supplemental benefits to current enrollees as described above, enrollees may voluntarily drop or discontinue optional supplemental benefits any time during the contract year upon proper advance notice to the *Medicare cost plan*.

The *Medicare cost plan* may not set health status standards for those enrollees whom it will accept for these optional supplemental services.

States may mandate that non-Medicare benefits be offered to *Medicare cost plan* enrollees as optional supplemental benefits.