



# Medicare Supplement

## Premium Payment List-Bill Administration Guide

### Understanding the Premium Payment List-Bill Program

This program simplifies the Medicare supplement premium-paying process for employers and you. All program participants (minimum of three) are on one billing statement.

Use list bill for Mutual of Omaha Medicare supplement plans paid for through:

- Pension deductions
- Employer contributions, and/or
- Direct bill by a third-party list-bill administrator

**Eligibility** – Program participants must be retirees (and/or their spouses) of the employer indicated on the enrollment form. The employer’s active employees are not eligible.

Refer to this guide to establish and maintain a list-bill account for Mutual of Omaha Medicare supplement sales through employers. If you have questions, contact a customer service representative at 1-800-877-1050.

#### How to Set Up a List-Bill Account

The following tells you how to establish a list-bill account (minimum of three lives) for each employer and describes the overall process:

- Step 1** Complete the list-bill enrollment form (M27024\_0412 available on Sales Professional Access in forms and materials)
- Step 2** Mail or fax the form to Mutual of Omaha:  
Mutual of Omaha  
3 – VIP Services  
Mutual of Omaha Plaza  
Omaha, NE 68175-3205  
Fax 1-866-613-8961
- Step 3** A customer service representative contacts you with the group number assigned to that list-bill account.

**Step 4** Indicate the group number on initial and all future Medicare supplement applications related to this group. There’s a space for it in the upper right corner.

**Step 5** Write “List Bill” on the initial and renewal mode lines of each application related to this group.

**Step 6** Submit the applications together to Mutual of Omaha as you normally do. Normal application processing applies.

**Step 7** Three weeks before the premium due date, Mutual of Omaha sends a statement listing all participants (policyholders) to the program administrator (employer or the employer’s third party administrator).

**Step 8** The administrator remits the amount due for all participants by the due date and coordinates participants’ premium payments if applicable.

#### How to Maintain the Account

**To add a person to the list-bill account** – Meet with him/her to complete the application and include the group number. Submit the application as usual.

**To remove someone from the list-bill account** – Follow the directions on the list-bill statement.

**To cancel the entire list-bill account** – Thirty days before canceling, the employer or third-party administrator must provide written notice to all individuals on the list-bill account and to Mutual of Omaha. The employer or third-party administrator is responsible for coordinating any necessary return of premiums.

*(More on back side.)*

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## Eligibility for Guarantee Issue Coverage

Retirees may be eligible for guarantee issue Mutual of Omaha Medicare supplement policies depending on their existing coverage. See the Existing Coverage questions on the list-bill enrollment form (M27024\_0412).

The following retiree scenarios show how Mutual of Omaha may handle coverage under different circumstances.

**Note:** Guarantee issue rights vary by state. Please refer to your current underwriting guidelines for state-specific guarantee issue coverage rules.

Situation	Mutual of Omaha Coverage
<p><b>#1</b> The retiree has an employer group health plan (including retiree or COBRA coverage) or union coverage that pays after Medicare pays.</p> <p>Coverage is ending.</p>	<p><b>Guarantee Issue</b></p> <ul style="list-style-type: none"> <li>• Retiree has the right to buy any plan that we offer in his/her state without underwriting</li> <li>• Retiree must apply no later than 63 calendar days after the date the coverage ends</li> <li>• You must provide documentation that the coverage is ending (termination letter) with the list-bill enrollment form</li> </ul>
<p><b>#2</b> The employer has a group Medicare supplement policy with individual certificates issued to retirees.</p> <p>Coverage is ending.</p>	<p><b>Guarantee Issue</b></p> <ul style="list-style-type: none"> <li>• Retiree has the right to buy any plan that we offer in his/her state without underwriting</li> <li>• Retiree must apply no later than 63 calendar days after the date the coverage ends</li> <li>• You must provide documentation that the coverage is ending (termination letter) with the list-bill form</li> </ul>
<p><b>#3</b> Retirees have an individual Medicare supplement policy for which the employer contributes a stipend or directly pays some or all of the premiums.</p> <p>Stipend or employer contribution is ending.</p>	<p><b>Underwriting Required</b></p> <p>All applicants are subject to underwriting, except those in a mandated open enrollment/guarantee issue period.</p> <p>Of course, retirees' current coverage is guaranteed renewable, and they may keep it as long as they pay premiums.</p>
<p><b>#4</b> The retiree has an employer group health plan.*</p> <p>The retiree voluntarily leaves the employer group health plan and wishes to purchase a Medigap plan.</p> <p>* This may include a group Medicare supplement policy with individual certificates issued to retirees, but not an individual Medicare supplement plan with an employer contribution/stipend.</p>	<p><b>Guarantee Issue</b></p> <ul style="list-style-type: none"> <li>• Retiree has the right to buy any plan that we offer in his/her state without underwriting</li> <li>• Retiree must apply no later than 63 calendar days after the date the coverage ends</li> </ul>

**Questions – Call 1-800-877-1050**