Commissioner Navarro spent some time at the DOI outreach table at this year’s Delaware State Fair. Pictured from left to right are Supervisor in Market Conduct and Producer Licensing, Robin David; Marketing Specialist, Kathy Jo Robbins; Insurance Commissioner Trinidad Navarro; Delaware Medicare Assistance Bureau (DMAB) Specialist, Ashanti Hutchinson.

DMAB provides free health insurance counseling for people with Medicare, including those under 65 years of age. Call DMAB at 302-674-7364.
The Department of Insurance is officially in its new Dover location at 1351 West North Street, Suite 101. The new space offers staff and consumers nearly 3,500 square feet of additional space and more parking. Building security has also been boosted with an added camera system. The move was an initiative sparked by Commissioner Navarro’s concern for the cost of rent at the Department’s previous location.

The rent at our new West North Street location is almost 30% less per square foot and the DOI will be 15 years into its current lease before the cost of rent equals what we were paying. The DOI will host a ribbon cutting ceremony for our new building on September 10th at 11 AM.
The Delaware Department of Insurance has received inquiries from Medicare eligible citizens concerning misunderstandings or misinformation they’ve received from some insurance agents and brokers regarding the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA). As this act is rather complex, it has not been determined if consumers have been misinformed, or if they did not fully understand what was relayed to them by agents and brokers. The lack of complete understanding can have a damaging effect relative to decision making for Medicare beneficiaries or their caretakers. To help alleviate the situation, Commissioner Trinidad Navarro issued a bulletin to agents and brokers in May of this year that clarified the requirements of MACRA. Listed below are some of the highlights of that MACRA bulletin.

Please read the following highlights to better understand how MACRA will change the availability of certain Medicare Supplement insurance plans, more commonly known as Medigap.

- “Newly eligible” means individuals who turn age 65 on or after January 1, 2020 or first become eligible for Medicare due to age, disability or end-stage renal disease on or after January 1, 2020.

- As of January 1, 2020, the sale of Medigap plans C, F and F High Deductible will be discontinued and no longer available for purchase by “newly eligible” Medicare beneficiaries.

- “Newly eligible” beneficiaries who turn age 65 on or after January 1, 2020 or first become eligible for Medicare due to age, disability or end-stage renal disease on or after January 1, 2020 can purchase Medigap plans D, G or G High Deductible as a substitute for Medigap plans C, F and F High Deductible.

- The discontinuation of plans C, F and F High Deductible will not affect you if you are currently age 65 or will be 65 before January 1, 2020.

- The discontinuation of plans C, F and F High Deductible will not affect you if you first become eligible for Medicare due to age, disability or end-stage renal disease before January 1, 2020.

- Individuals who were Medicare eligible before January 1, 2020 will still be able to keep their C, F or F High Deductible plans and will be able to repurchase those lettered plans on or after January 1, 2020.

- Medigap coverage cannot be canceled and is guaranteed renewable as long as the policyholder pays the premium.

For more information about upcoming changes to Medigap, please visit insurance.delaware.gov/divisions/dmab/ or call the Delaware Medicare Assistance Bureau (DMAB) at 1-800-336-9500 to speak to one of our Medicare counselors.
A Wilmington woman was indicted by the New Castle County Grand Jury for insurance fraud and other felony charges. Theresa T. Milton, 44, of the 900 block of Clayton Street, was indicted on seven felony counts of insurance fraud, one felony count of theft by false pretense, and one count of falsifying business records. An Investigation by the Delaware Department of Insurance Fraud Prevention Bureau revealed that beginning on the 4th day of May, 2017, and continuing through on or about the 28th day of September, 2017, Theresa Milton submitted false claims for emergency medical services to Highmark BCBS of Delaware totaling slightly more than $16,000. She had falsified invoices for out of network ambulance services and submitted claims for payment for those services to Highmark BCBS of Delaware. Highmark became suspicious of one of the claims and made an inquiry to the ambulance service. It was discovered that the claims appeared to be false, and the case was referred to the Department of Insurance Fraud Prevention Bureau for investigation. The investigation substantiated the false claims with fictitious business records, and the indictment was issued.

Commissioner Trinidad Navarro stated, “The Fraud Unit of the Delaware Department of Insurance takes these cases seriously and actively investigates all reported cases of insurance fraud. We work closely with our partners at the Delaware Department of Justice to see these cases through, protecting consumers. A case such as this brings to light that insurance fraud costs everyone.”

If you suspect insurance fraud, you can report it by calling 302-674-7350 or email to fraud@delaware.gov.