**Section 2008.30 Applicability and Scope**

a) Except as otherwise specifically provided in Sections 2008.70, 2008.75, 2008.76, 2008.80, 2008.90 and 2008.103 of this Part, this Part shall apply to:

1) All Medicare supplement policies delivered or issued for delivery in this State on or after June 1, 1982; and

2) All certificates issued under group Medicare supplement policies, which policies or contracts have been delivered or issued for delivery in this State.

b) This Part shall not apply to:

1) *"Accident Only"* or *"Specified Disease"* types of policies (Section 363(1)(b) of the Illinois Insurance Code (the Code));

2) Policies or health care benefit plans, including group conversion policies, provided to Medicare eligible persons, which policies or plans are not marketed or purported or held to be Medicare supplement policies or benefit plans (Section 363(1)(b) of the Code); or

3) A policy or contract of one or more employers or labor organizations, or of the trustees of a fund established by one or more employers or labor organizations, or combination thereof, for employees or former employees, or a combination thereof, or for members or former members, or a combination thereof, of the labor organizations.

c) Under section 104(c) of the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA) (PL 110-275), policies that are advertised, marketed or designed primarily to cover out-of-pocket costs under Medicare Advantage Plans (established under Medicare Part C) must comply with the Medicare supplement requirements of section 1882(o) of the Social Security Act (42 USC 1395ss(o)).

(Source: Amended at 42 Ill. Reg. 21625, effective November 26, 2018)