**Section 2008.60 Policy Provisions**

a) Except for permitted preexisting condition clauses as described in Section 2008.70(a)(1), Section 2008.71(a)(1), and Section 2008.64(a)(1) of this Part, no policy or certificate may be advertised, solicited or issued for delivery in this State as a Medicare supplement policy if such policy or certificate contains limitations or exclusions on coverage that are more restrictive than those of Medicare.

b) No Medicare supplement policy or certificate may use waivers to exclude, limit, or reduce coverage or benefits for specifically named or described preexisting diseases or physical conditions.

c) No Medicare supplement policy or certificate in force in the State shall contain benefits which duplicate benefits provided by Medicare.

d) Subject to Sections 2008.70(a)(4), (5) and (7) and 2008.71(a)(4) and (5):

1) A Medicare supplement policy with benefits for outpatient prescription drugs in existence prior to January 1, 2006 shall be renewed for current policyholders who do not enroll in Part D at the option of the policyholder.

2) A Medicare supplement policy with benefits for outpatient prescription drugs shall not be issued after December 31, 2005.

3) After December 31, 2005, a Medicare supplement policy with benefits for outpatient prescription drugs will not be renewed after the policyholder enrolls in Medicare Part D unless:

A) The policy is modified to eliminate outpatient prescription coverage for expenses of outpatient prescription drugs incurred after the effective date of the individual's coverage under a Part D plan; and

B) Premiums are adjusted to reflect the elimination of outpatient prescription drug coverage at the time of Medicare Part D enrollment, accounting for any claims paid, if applicable.

(Source: Amended at 33 Ill. Reg. 8904, effective June 10, 2009)