



Wisconsin Office of the
COMMISSIONER OF INSURANCE

**MARKET REGULATION
AND ENFORCEMENT**

Medicare Supplement Policies Application User Guide for Companies

Last Updated August 21, 2026

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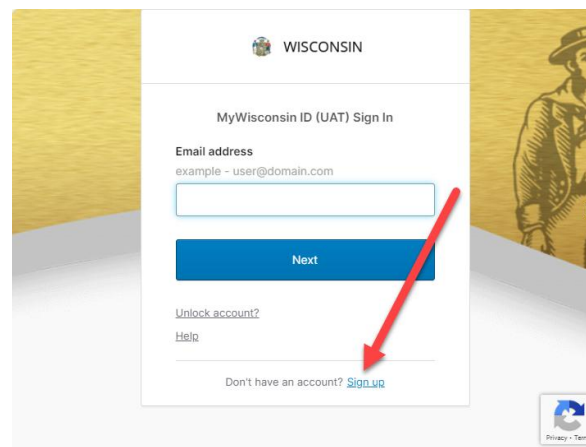
Overview

Health insurers in Wisconsin can choose to submit their Medicare Supplement rates for all plans they offer annually. If submitted, the rates will be presented to consumers applying for the Medicare Supplement plan during their open enrollment or guaranteed issue periods. This application makes the data collection process more efficient for both submitting companies and OCI. Instructions for this application are included below.

Access the application

To have your rates posted on the Wisconsin Medicare Supplement Policy Rate Search site, you'll need to use the [Medicare Supplement Policies – Company Application](#).

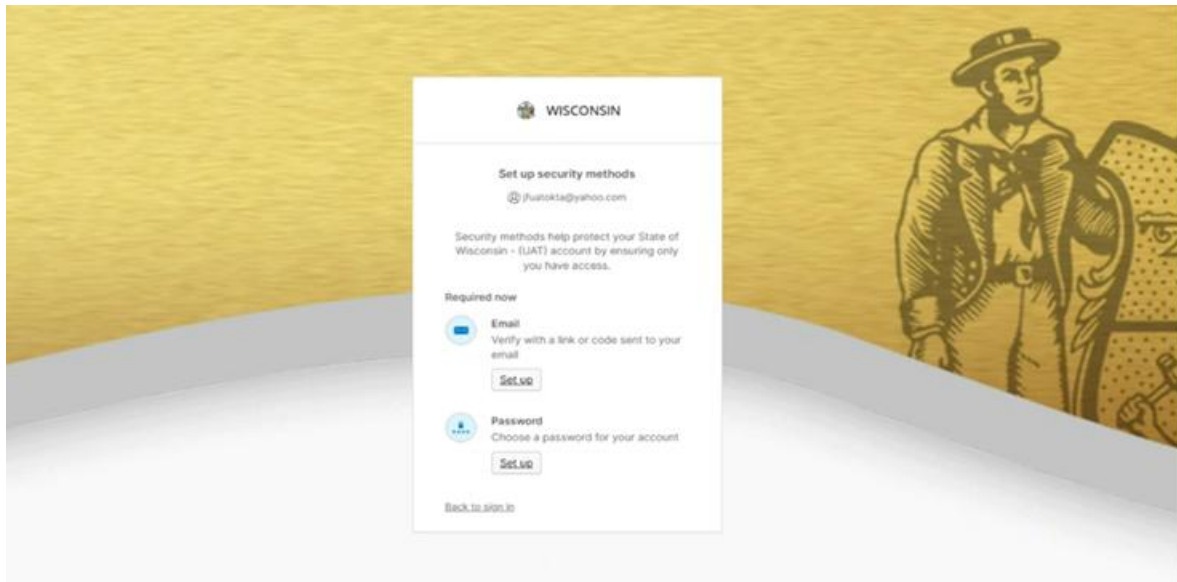
If you don't have a MyWisconsin ID, you can create one by clicking "Sign up" at the bottom of the page. Each company staff member assigned by your organization to submit rates will need to create an individual MyWisconsin ID account. The account cannot be shared.



Creating your MyWisconsin ID – if you do not already have one

IMPORTANT: If you do not already have a MyWisconsin ID, when you initially set up the ID, you will be prompted to set up security methods. See Illustration #1 below. Be sure to select "Set up" for Email first, and then select "Set up" for Password. You will need to set up both items - not one or the other. If you set one of those items up incorrectly, you can return the next day to correct the issue. Every 24 hours the system will clear out any ids that were not set up correctly.

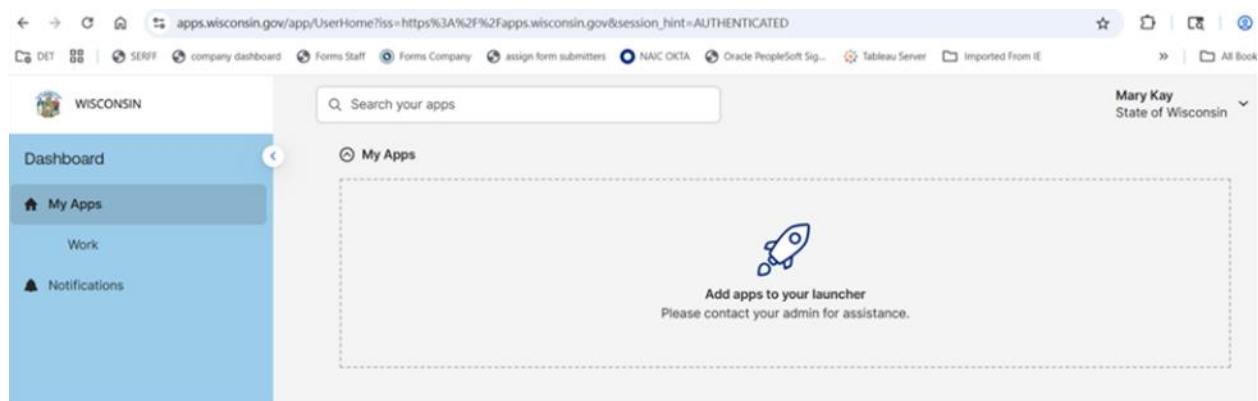
ILLUSTRATION #1



- Read the step-by-step guide for a new MyWisconsin ID account at https://det.wi.gov/Pages/MyWisconsin_ID_Self_Registration.aspx
- Go here to set up MyWisconsin ID: https://det.wi.gov/Pages/MyWisconsin_ID.aspx.

Once you have created your MyWisconsin ID, you can disregard the screen shown in Illustration #2 below, and proceed to the Medicare Supplement application and the Instructions page.

ILLUSTRATION #2



Review the instructions page

When you enter the Medicare Supplement Filing Application, you will see an instructions page. Review the information on this page then click **Next** to continue.

State of Wisconsin

Office of the Commissioner of Insurance
Medicare Supplement Policies - Company Application

Instructions

This application is used to submit Medicare Supplement rates for consumer viewing on the Office of the Commissioner of Insurance website. Questions regarding this online application should be directed to OCIMedicareSupplement@wisconsin.gov.

Note:

- The rates should not include any discount available to the customer.
- The rates presented would be for a consumer applying for the Medicare Supplement plan during their open enrollment period.

Next

Select a company

The next screen provides a list of companies assigned to you. If the company you’re submitting data for is listed, click the radio button on the left to select that company.

State of Wisconsin

Office of the Commissioner of Insurance

Medicare Supplement Policies - Company Application

Assigned Companies

The companies listed below are assigned to you. If additional companies need to be assigned, select the "Request Company" button below to request the update.

Select one from list

☐

NAIC CoCode:

☐

NAIC CoCode:

< Previous

Request Company

New Form

If the company you’re submitting data for is not listed, click the “Request Company” button and fill out the fields listed in the image below. You will not be able to continue until the company is assigned.

Request Company Assignment

Please provide the company's name NAIC CoCode below. A request will be sent to our team to review and process the assignment.

Supervisor Name

Supervisor Email

Company NAIC CoCode

Company Name

Request

Cancel

Review forms and start a new form

Once you've selected the correct company, a list of forms will appear if the company has previously created or submitted a form. Click **View** or **Edit** to see the details of a form or make changes if needed. The Status column indicates the status of each form:

- Saved forms have not been sent to OCI to review.
- Submitted forms have been sent to OCI for review.
- Rejected forms were not approved by OCI and need to be edited.

Start a new form by clicking **New Form**.

State of Wisconsin

Office of the Commissioner of Insurance

Medicare Supplement Form

Assigned Companies

The companies listed below are assigned to you. If additional companies need to be assigned, contact OCIMedicareSupplement@wisconsin.gov to request the update.

Select one from list

☒

NAIC CoCode:

☐

NAIC CoCode:

Previous Forms

A red notification badge (●) on the "View" button indicates that there are unread messages associated with that form.

Date Rates Effective	Form Type	Last Updated	Status	Actions
12-31-2024	Medicare Supplement Basic Plan	06-10-2025	Approved	View

< Previous

New Form

Choose your form

Select the type of form you're submitting and click **Next**.

State of Wisconsin

Office of the Commissioner of Insurance
Medicare Supplement Policies - Company Application

Choose your form

☐ Medicare Supplement Basic Plan

☐ Medicare Supplement Cost-Sharing Plan 25%

☐ Medicare Supplement Cost-Sharing Plan 50%

☐ Medicare Supplement High-Deductible Plan

☐ Medicare Select Basic Plan

☐ Medicare Select Cost-Sharing Plan 25%

☐ Medicare Select Cost-Sharing Plan 50%

☐ Medicare Select High-Deductible Plan

☐ Medicare Cost Plan

[< Previous](#)

[Next](#)

Enter contact information

Your name and email address from your MyWisconsin ID account will automatically populate on the Form Contact Information screen. You'll need to enter your phone number and any applicable extension.

There is also a section for the company Medicare Supplement support phone number and website. If previously supplied to OCI, these will be prepopulated but can be modified.

Form Contact Information

Questions regarding the information submitted through this form will be directed to the following individual:

Full Name

Email

Phone Number *

Extension (optional)

Public Website Company Contact Information

This phone number and website will be available for the public to use for any questions.

Company Medicare Supplement Support Phone Number *

Company Medicare Supplement Website URL *

[< Previous](#)

[Next](#)

Answer all form questions

Once you've entered your contact information, you can begin filling out the form. By submitting a form, your company is electing to be included in the Medicare Supplement Insurance Approved Policies List on OCI's public-facing website. Below is a screenshot of the Medicare Select Basic Plan questions. After all fields are completed, click **Next** to continue.

Form Questions

Public Listing Notice
Note that by submitting this information, the selected company elects to be included in the Wisconsin Medicare Supplement Policy Rate Search on OCI's public-facing website.

Date Rates are Effective *

mm/dd/yyyy

Plan Name

Policy Form Number *

If you are not sure, refer to actuarial memorandum

SERFF Filing Number *

Select one *

☐ Group ☐ Individual

Premium based on (select one) *

☐ Attained Age ☐ Issue Age

Choose 'Yes' or 'No' for each *

Waiting Period? * ☐ Yes ☐ No

Policy fee or administrative fee charged with initial enrollment * ☐ Yes ☐ No

Rates for tobacco users are higher outside of open enrollment period * ☐ Yes ☐ No

Different premiums for each age between 65 and 85 *
This form is not intended to capture details for different age ranges. Selecting "Yes" will indicate that consumers should contact your company for more information on premium rates. ☐ Yes ☐ No

Multi-policy premium discount offered * ☐ Yes ☐ No

Discount offered for Electronic Funds Transfer (EFT) premium payment * ☐ Yes ☐ No

Household premium discount offered *
Discount off premium if person enrolled lives with another person(s) who is a permanent resident of the household. ☐ Yes ☐ No

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Next

Enter service areas

On the Service Areas screen, you will need to enter what areas the plan will cover either by counties or zip codes. If no prior forms exist, the service areas will need to be entered manually. If a form has been saved previously, you can click **Use Previous Areas**. This button will be hidden if no prior forms exist. When you've finished adding the service areas, click **Save and Continue**. You can also click **Save Draft** to save your progress while entering service areas.

State of Wisconsin

Office of the Commissioner of Insurance

Medicare Supplement Policies - Company Application

Service Areas

If this is an update to a previous submission, you may use the "Use Previous Areas" option to load service areas from the previous year.

Entering Zip Codes or Zip Code Ranges:

- Begin typing the first 3 numbers of a zip code. This will cause a window to open listing all the zip codes starting with that prefix. Select the individual zip codes to include in the Service Area or click the Select All button. Click the Add button to add the selected zip codes in that prefix.
- Individual zip codes can be added by typing the entire 5-digit zip code in the search box or by selecting from the complete list.
- To include more than one prefix, type the lowest zip code followed by a - (hyphen) then the highest zip code. For example, 53001-53299

Entering Counties:

- Click in County Name search box will open a window listing all Wisconsin counties.
- Select the individual counties to include in the Service Area or click the Select All button.
- Clicking the "Add" button will add the selected counties.

Area 1

Area 2

Zip Code

E.g., 53545, 535-536

Add

Use Previous Areas

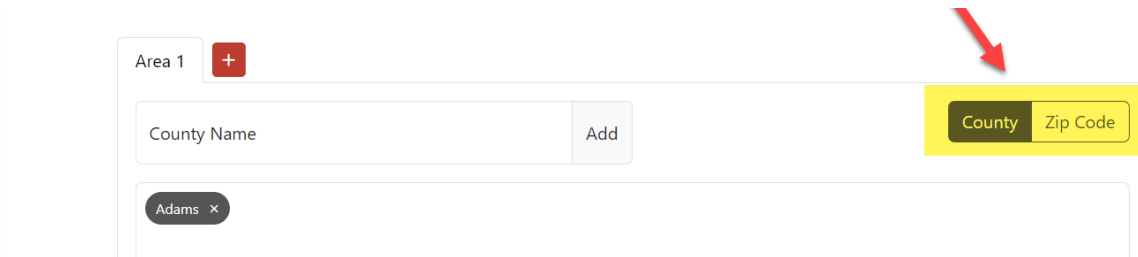
County

Zip Code

Group	Suffixes	Actions
530	01, 02, 03	Edit Remove
535	45, 49	Edit Remove

Choose to enter service areas by county or zip code

Before you start entering service areas, you must choose to enter by County or Zip Code, and you can only choose one. In other words, your entries must either be all counties or all zip codes. Switching between these options after entering information will result in a pop-up box warning that your selections will be deleted.

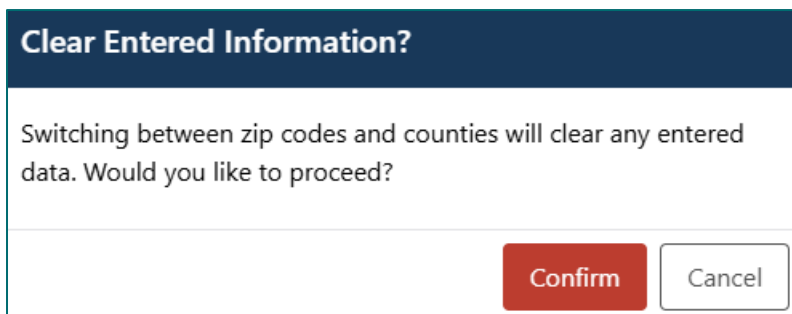


Area 1 +

County Name Add

County Zip Code

Adams x



Clear Entered Information?

Switching between zip codes and counties will clear any entered data. Would you like to proceed?

Confirm Cancel

Select service areas by county

If you choose to enter by county, clicking the County Name field will display all 72 Wisconsin counties. To select counties, you can either scroll to find them or type the county name to filter results faster. You can also click **Select All** to select all counties. Once you have all the counties selected for this area, click **Add**.

The screenshot shows a user interface for selecting Wisconsin counties. At the top is a text input field labeled "County Name" and an "Add" button. Below the input field is a scrollable list of 16 counties, each with a checkbox. A red circle with the number "1" points to the "Buffalo" checkbox. Another red circle with the number "2" points to the "Add" button. At the bottom right of the list is a "Select All" button.

County Name	Add
☒ Adams ☒ Ashland ☒ Barron ☐ Bayfield	2
☐ Brown ☐ Buffalo 1 ☐ Burnett ☐ Calumet	
☐ Chippewa ☐ Clark ☐ Columbia ☐ Crawford	
☐ Dane ☐ Dodge ☐ Door ☐ Douglas ☐ Dunn	
☐ Eau Claire ☐ Florence ☐ Fond du Lac	
☐ Forest ☐ Grant ☐ Green ☐ Green Lake	
Select All	

Select service areas by zip code

If you choose to enter by zip code, click in the Zip Code field and begin typing to bring up a list of matching Wisconsin zip codes. To select zip codes, you can either scroll to find them or type the zip code number to filter results faster. You can also enter the start of a zip code and then click **Select All**, to select all the zip codes with those starting numbers. For example, entering 537 in the zip code field and clicking **Select All** will select 53701, 53702, etc. Once you have zip codes selected for this area, click **Add**.

The screenshot shows a user interface for selecting service areas. At the top, there is a tab labeled 'Area 1' with a red square containing a white plus sign to its right. Below this is a search bar labeled 'Zip Code' with an 'Add' button to its right. A dropdown menu is open below the search bar, displaying a list of Wisconsin zip codes, each preceded by an unchecked checkbox. The zip codes are arranged in five rows: 53001-53005, 53006-53011, 53012-53016, 53017-53021, and 53022-53027. A sixth row shows 53029, 53031, 53032, 53033, and 53034. A 'Select All' button is located at the bottom right of the dropdown list.

Zip Code	Add
☐ 53001 ☐ 53002 ☐ 53003 ☐ 53004 ☐ 53005	Add
☐ 53006 ☐ 53007 ☐ 53008 ☐ 53010 ☐ 53011	
☐ 53012 ☐ 53013 ☐ 53014 ☐ 53015 ☐ 53016	
☐ 53017 ☐ 53018 ☐ 53019 ☐ 53020 ☐ 53021	
☐ 53022 ☐ 53023 ☐ 53024 ☐ 53026 ☐ 53027	
☐ 53029 ☐ 53031 ☐ 53032 ☐ 53033 ☐ 53034	
Select All	

Edit service area selections

After counties or zip codes are added to a service area, they can be modified by clicking the pencil icon to the right. They can also be deleted by clicking the trash can icon.

Area 1

Zip Code

Add

County

Zip Code

Group	Suffixes	Actions
530	01, 02, 06	 

Adding additional service areas

If rates differ across service areas, you can add additional areas by clicking the + button.

Use the + button to add additional service areas. Selections can be made the same as before. Additionally, you can click **Add Remaining** to add any counties or zip codes that weren't selected in previous service area(s).

The screenshot shows a user interface for managing service areas. At the top, there are two tabs: 'Area 1' with a blue 'x' icon and 'Area 2' with a black 'x' icon. To the right of these tabs is a red square button with a white '+' icon. Below the tabs is a large input field labeled 'Zip Code' on the left and an 'Add' button on the right. A red arrow points to the 'Add' button. To the right of the 'Zip Code' input field is a yellow button labeled 'Add Remaining'. Further to the right are two buttons: 'County' and 'Zip Code', both with dark grey backgrounds and white text.

Entering rates

Rates need to be entered for all selected products, ages, genders and service areas. If the rate applies to all genders, enter the same amount in each cell. Rates for all genders other than female should be entered in the male column. Click **Save Draft** at any time to save what you’ve entered. Click **Submit** after reviewing all information to send the form to OCI for review.

State of Wisconsin
Office of the Commissioner of Insurance
Medicare Supplement Policies - Company Application

Medicare Select Cost-Sharing Plan 25%

Rate Entry

Ensure rates are entered below for each of the age ranges and policy types.
Once all fields have been entered and verified as correct, click the Submit button to submit the entire form to OCI review.
Questions regarding this online application should be directed to OCIMedicareSupplement@wisconsin.gov.

Area 1Area 2

	Annual Premium - Basic Policy		Part A - Deductible		Additional Home Health Visits	
Age	Male	Female	Male	Female	Male	Female
<65	51.33	62.45	68.26	45.87	86.91	41.66
65	90.80	87.19	12.98	59.87	74.39	21.81
70	65.02	28.76	15.62	96.88	92.61	26.10
75	38.90	24.35	77.74	41.27	62.10	71.21
80	44.72	34.47	23.37	61.32	51.68	95.18
85	85.65	44.65	57.97	28.11	91.62	39.28

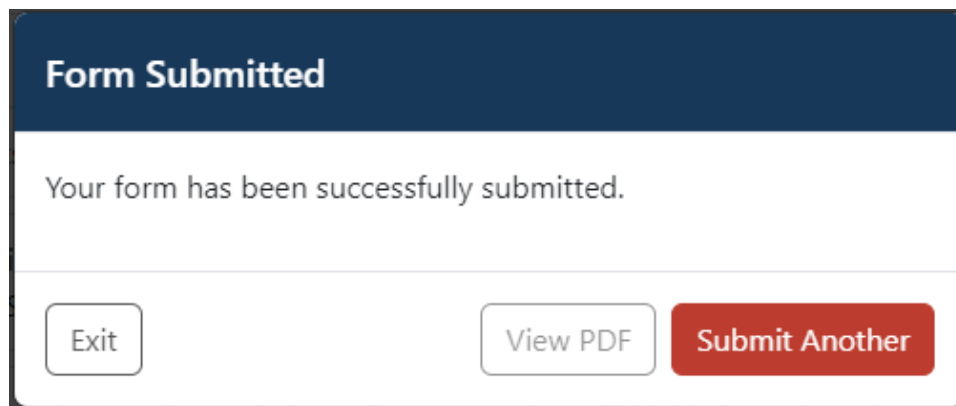
☒ I acknowledge that I have reviewed all entered data for accuracy and understand that, upon submission, this data will be made available to the public.

< Previous

Save DraftSubmit

Review your submission

After submitting, a PDF output of the form is available to review or download. Once completed, you may exit the application or click the **Submit Another** to return to the company selection screen.



The image shows a confirmation screen with a dark blue header containing the text "Form Submitted". Below the header, on a white background, is the message "Your form has been successfully submitted." At the bottom of the screen, there are three buttons: "Exit" (a light gray button with a thin border), "View PDF" (a light gray button with a thin border), and "Submit Another" (a solid red button with white text).

Comments and submission history

When viewing a prior submission, you can view submission history and responses from OCI staff at the bottom of the form. There will also be System comments that display when a company or staff user takes action on a form, such as submitting, approving, or rejecting.

Comments & Submission History

Staff 10/14/2025 10:31 AM
rejecting form 10/14

System 10/14/2025 10:31 AM
Form rejected by OCI Staff member Lauren Stephenson.

System 10/14/2025 10:29 AM
Form submitted by Lauren Stephenson.

Resubmitting a rejected form

OCI staff may reject your submission. If this happens, you will receive an email notifying you of the rejection. The email will include comments from the staff member who rejected your form. You will need to log into the application again to resubmit. On the submissions page, an Edit button will be shown for that form. Once clicked, you'll complete the submission just like before.

Previous Forms

A red notification badge (●) on the "View" button indicates that there are unread messages associated with that form.

Date Rates Effective	Form Type	Last Updated	Status	Actions	
12-31-2024	Medicare Supplement Basic Plan	06-09-2025	Rejected	View	Edit