

~~(7) PROVIDE, IN THE CASE OF INDIVIDUALS COVERED UNDER MORE THAN ONE HEALTH BENEFIT PLAN, FOR COORDINATION OF COVERAGE UNDER ALL OF THOSE PLANS IN AN EQUITABLE MANNER.~~

~~(B) (1) A CARRIER MAY NOT OFFER ANY HEALTH BENEFIT PLAN IN THE STATE UNLESS THE CARRIER OFFERS AT LEAST ONE HEALTH BENEFIT PLAN THAT INCLUDES ONLY THE EFFECTIVE BENEFITS SPECIFIED BY THE COMMISSION UNDER § 701 OF THIS SUBTITLE.~~

~~(2) BENEFITS IN ADDITION TO THE EFFECTIVE BENEFITS MAY BE OFFERED IF THE ADDITIONAL BENEFITS:~~

~~(I) ARE OFFERED AND PRICED SEPARATELY FROM BENEFITS SPECIFIED UNDER § 701 OF THIS SUBTITLE; AND~~

~~(II) DO NOT HAVE THE EFFECT OF DUPLICATING ANY OF THOSE BENEFITS.~~

~~(3) A CARRIER MAY NOT OFFER A HEALTH BENEFIT PLAN THAT HAS FEWER THAN THE EFFECTIVE BENEFITS.~~

~~(C) A CARRIER SHALL RENEW HEALTH BENEFIT PLANS, EXCEPT IN ANY OF THE FOLLOWING CASES:~~

~~(1) NONPAYMENT OF THE REQUIRED PREMIUMS;~~

~~(2) FRAUD OR MISREPRESENTATION OF AN ENROLLEE OR A REPRESENTATIVE OF AN ENROLLEE;~~

~~(3) REPEATED MISUSE OF A PROVIDER NETWORK PROVISION INCLUDING UNREASONABLE REFUSAL OF THE ENROLLEE TO FOLLOW A PRESCRIBED COURSE OF TREATMENT, ABUSIVE OVER UTILIZATION BY AN ENROLLEE, OR VIOLATION OF REASONABLE POLICIES OF A CARRIER; OR~~

~~(4) THE CARRIER ELECTS TO TERMINATE ALL HEALTH BENEFIT PLANS IN THE STATE.~~

~~(D) (1) A CARRIER THAT ELECTS NOT TO RENEW HEALTH BENEFIT PLANS SHALL:~~

~~(I) PROVIDE ADVANCE NOTICE OF ITS DECISION UNDER THIS PARAGRAPH TO THE INSURANCE COMMISSIONER;~~

~~(II) PROVIDE NOTICE OF THE DECISION TO ENROLLEES AT LEAST 120 DAYS PRIOR TO THE NONRENEWAL OF ANY HEALTH BENEFIT PLAN BY THE CARRIER.~~

~~(2) THE CARRIER SHALL BE PROHIBITED FROM WRITING NEW BUSINESS IN THE STATE FOR A PERIOD OF 3 YEARS FROM THE DATE OF NOTICE TO THE INSURANCE COMMISSIONER OR UNTIL THE INSURANCE COMMISSIONER INVITES THE CARRIER TO RENEW PARTICIPATION, WHICHEVER IS SOONER.~~