- (2) Provide, or offer as an option, [at least the following benefits:
- (i) After exhaustion of all Medicare inpatient hospital coverage, including the lifetime reserve days, coverage, for a period of 365 days, of 90 percent of all Medicare Part A eligible expenses for hospitalization not covered by Medicare; and
- (ii) Coverage] COVERAGE of the initial annual deductible FOR [and of 20 percent of the amount of] Medicare eligible expenses under Medicare Part B[, which coverage may be subject to a maximum benefit in any calendar year not less than \$5,000].

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- (b) (1) Before accepting an application, OR AT ANY OTHER TIME REQUIRED BY REGULATION BY THE COMMISSIONER, the insurer or the agent shall deliver to the prospect a Medicare supplement buyer's guide that is printed in at least 12-point type. The buyer's guide also shall be delivered when an existing policy is converted to a Medicare supplement policy.
- (2) The text of the guide shall be as published by the Commissioner under § 468E of this subtitle and the form of the guide shall be as required by rules and regulations adopted by the Commissioner.

"This policy is not a Medicare supplement policy. It is not designed to fill the 'gaps' of Medicare. YOU SHOULD CONSULT THE BUYER'S GUIDE PROVIDED TO YOU WITH THIS POLICY".

HOWEVER, IF THE PROPOSED POLICY COMPLIES WITH THE REQUIREMENTS OF SUBPARAGRAPHS (I), (II), AND (III) OF SECTION 468C(B)(1), BUT DOES NOT COMPLY WITH THE OTHER REQUIREMENTS OF SECTION 468C OF THIS SUBTITLE, A STATEMENT PRINTED IN 12-POINT TYPE SHALL BE GIVEN THAT:

"THIS POLICY IS NOT A COMPLETE MEDICARE SUPPLEMENT POLICY. IT IS NOT DESIGNED TO COMPLETELY FILL THE GAPS' OF MEDICARE. YOU SHOULD CONSULT WITH THE BUYER'S GUIDE PROVIDED TO YOU WITH THIS POLICY".

SUBPARAGRAPH (I) OF THIS PARAGRAPH, THE COMMISSIONER SHALL ADOPT REGULATIONS NECESSARY TO MAKE THE PROVISIONS OF THIS