

(III) CREDIT HEALTH INSURANCE;

(IV) MEDICARE SUPPLEMENT POLICIES;

(V) LONG-TERM CARE INSURANCE;

(VI) DISABILITY INCOME INSURANCE;

(VII) COVERAGE ISSUED AS A SUPPLEMENT TO LIABILITY INSURANCE;

(VIII) WORKERS' COMPENSATION OR SIMILAR INSURANCE;

(IX) DISEASE-SPECIFIC INSURANCE;

(X) AUTOMOBILE MEDICAL PAYMENT INSURANCE;

(XI) DENTAL INSURANCE; OR

(XII) VISION INSURANCE.

~~(H)~~ (I) (1) "LATE ENROLLEE" MEANS AN ELIGIBLE EMPLOYEE OR DEPENDENT WHO REQUESTS ENROLLMENT IN A HEALTH BENEFIT PLAN UNDER THIS SUBTITLE FOLLOWING THE INITIAL ENROLLMENT PERIOD PROVIDED UNDER THE TERMS OF THE HEALTH BENEFIT PLAN.

(2) AN ELIGIBLE EMPLOYEE OR DEPENDENT MAY NOT BE CONSIDERED A LATE ENROLLEE IF:

~~(H)~~ THE INDIVIDUAL:

1: WAS COVERED UNDER A PUBLIC OR PRIVATE HEALTH INSURANCE OR OTHER HEALTH BENEFIT ARRANGEMENT AT THE TIME THE INDIVIDUAL WAS ELIGIBLE TO ENROLL;

2: HAS LOST COVERAGE UNDER A PUBLIC OR PRIVATE HEALTH INSURANCE OR OTHER HEALTH BENEFIT ARRANGEMENT AS A RESULT OF TERMINATION OF EMPLOYMENT OR ELIGIBILITY, THE TERMINATION OF THE OTHER PLAN'S COVERAGE, DEATH OF A SPOUSE, OR DIVORCE; AND

3: REQUESTS ENROLLMENT WITHIN 30 DAYS AFTER TERMINATION OF COVERAGE PROVIDED UNDER A PUBLIC OR PRIVATE HEALTH INSURANCE OR OTHER HEALTH BENEFIT ARRANGEMENT;

~~(H)~~ THE INDIVIDUAL IS EMPLOYED BY AN EMPLOYER WHICH OFFERS MULTIPLE HEALTH BENEFIT PLANS AND THE INDIVIDUAL ELECTS A DIFFERENT PLAN DURING AN OPEN ENROLLMENT PERIOD;

~~(H)~~ (I) THE INDIVIDUAL REQUESTS ENROLLMENT WITHIN 30 DAYS OF BECOMING AN ELIGIBLE EMPLOYEE;

~~(H)~~ (II) A COURT HAS ORDERED COVERAGE TO BE PROVIDED FOR A SPOUSE OR MINOR CHILD UNDER A COVERED EMPLOYEE'S HEALTH BENEFIT PLAN; OR