

~~(H) THE CHILD HAS BEEN OR WILL BE ENROLLED UNDER COMPARABLE HEALTH INSURANCE COVERAGE WHICH WILL TAKE EFFECT NOT LATER THAN THE EFFECTIVE DATE OF SUCH DISENROLLMENT; OR~~

~~(HH) THE EMPLOYER HAS ELIMINATED FAMILY HEALTH COVERAGE FOR ALL OF ITS EMPLOYEES.~~

~~(D) IF A CHILD HAS HEALTH INSURANCE COVERAGE THROUGH A HEALTH INSURER OF A NONCUSTODIAL/INSURING PARENT, THE INSURER SHALL:~~

~~(1) PROVIDE THE NONINSURING PARENT WITH INFORMATION ON THE ENROLLMENT OF THE CHILD IN THE FAMILY COVERAGE OF THE INSURING PARENT NECESSARY FOR THE CHILD TO OBTAIN BENEFITS THROUGH SUCH COVERAGE; AND~~

~~(2) WHERE THE NONINSURING PARENT HAS INCURRED EXPENSES RELATING TO HEALTH CARE PROVIDED TO THE CHILD, PROCESS THE CLAIMS FORM AND MAKE THE APPROPRIATE PAYMENTS TO THE NONINSURING PARENT, THE HEALTH CARE PROVIDER, OR THE DEPARTMENT OF HEALTH AND MENTAL HYGIENE.~~

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~~(A) (1) IN THIS SECTION THE FOLLOWING TERMS HAVE THE MEANINGS INDICATED:~~

~~(2) "INSURER" MEANS:~~

~~(i) A COMMERCIAL INSURER, A NONPROFIT HEALTH SERVICE ORGANIZATION, OR A HEALTH MAINTENANCE ORGANIZATION OPERATING IN THIS STATE UNDER A CERTIFICATE OF AUTHORITY ISSUED BY THE MARYLAND INSURANCE COMMISSIONER;~~

~~(ii) A GROUP HEALTH PLAN, AS DEFINED IN § 607(1) OF THE EMPLOYEE RETIREMENT INCOME SECURITY ACT OF 1974; AND~~

~~(iii) AN ENTITY OFFERING A SERVICE BENEFIT PLAN.~~

~~(3) "HEALTH INSURANCE COVERAGE" MEANS ANY TYPE OF HEALTH CARE COVERAGE UNDER WHICH MEDICAL CARE SERVICES CAN BE PROVIDED TO THE CHILD THROUGH AN INSURER.~~

~~(B) AN INSURER MAY NOT CONSIDER WHETHER AN INDIVIDUAL IS ELIGIBLE FOR OR IS RECEIVING MEDICAL ASSISTANCE FROM THIS OR ANY OTHER STATE UNDER 42 U.S.C. §1369(A) WHEN:~~

~~(1) DETERMINING THE ELIGIBILITY OF THE INDIVIDUAL FOR ENROLLMENT IN HEALTH INSURANCE COVERAGE; OR~~

~~(2) CALCULATING ANY PAYMENTS FOR BENEFITS FOR WHICH THE INDIVIDUAL IS ELIGIBLE UNDER THE HEALTH INSURANCE COVERAGE.~~

~~(C) UPON PRESENTATION OF PROOF OF PAYMENT A CLAIM TO AN INSURER, THE STATE SHALL BE REIMBURSED BY THE INSURER TO THE EXTENT THAT:~~