

(3) A COMBINATION OF APPROVED PAGES MAY FORM A COMPLETE POLICY OR CONTRACT IF A SCHEDULE IS FILED WITH THE COMMISSIONER THAT SHOWS THE PAGES TO BE USED TO FORM EACH PARTICULAR POLICY OR CONTRACT.

(F) SAME STANDARDS FOR INTRASTATE AND OUT-OF-STATE FORMS.

THE APPLICABLE STANDARDS FOR FORMS USED BY DOMESTIC INSURERS FOR DELIVERY IN THE STATE SHALL APPLY TO FORMS USED BY DOMESTIC INSURERS FOR DELIVERY OUTSIDE THE STATE.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 375(a), (b), (d), (e), and (f).

In subsection (c)(3) and (4) of this section, the references to the "initial filing period" are substituted for the former, more precise references to "such 60 days" and the "initial 60-day period" because the former law merely stated that a filing must be made "not less than 60 days" before delivery. A filing period thus may be longer than 60 days.

In the introductory language of subsection (d) of this section, the former reference to "the requirements of" this section is deleted as surplusage.

Also in the introductory language of subsection (d) of this section, the former language "as specified in such order" is deleted as surplusage.

In subsection (e)(1) of this section, the former reference to provisions that "otherwise" comply with this article is deleted as surplusage.

In subsection (e)(2) of this section, the former reference to the filing of alternate pages after approval of the initial policies or contracts "with which they are to be used" is deleted as surplusage.

In subsection (f) of this section, the reference to forms used for delivery "in the State" is substituted for the former reference to forms "for domestic use" to conform to similar references elsewhere in this section.

Defined terms: "Annuity contract" § 1-101

"Commissioner" § 1-101

"Domestic insurer" § 1-101

"Health insurance" § 1-101

"Life insurance" § 1-101

"Policy" § 1-101

12-204. HEARINGS ON MINIMUM BENEFITS OR COVERAGE.

(A) PURPOSE.

THE COMMISSIONER MAY HOLD HEARINGS TO DETERMINE IF ACCIDENT, DISABILITY, AND HEALTH INSURANCE POLICIES MEET THE REQUIREMENTS OF § 12-205 OF THIS SUBTITLE, SO THAT FRAUD AND THE ISSUANCE OF INSURANCE POLICIES ECONOMICALLY UNSOUND TO INSUREDS MAY BE PREVENTED AND TO ENSURE THAT A MINIMUM AMOUNT OF BENEFITS OR COVERAGE IS MADE AVAILABLE TO THE POLICY OR CERTIFICATE HOLDERS.