

entities other than insurers, and to avoid possible conflict with the definition of "insurer" in § 1-101 of this article.

In subsection (b)(1) of this section, the reference to nonprofit health service "plans" is substituted for the former reference to a nonprofit health service "organization" for consistency with terminology used throughout this article.

In subsection (b)(3) of this section, the reference to "persons" that offer a service benefit plan is substituted for the former reference to an "entity" that offers a service benefit plan to avoid conflict with the usage of the term "entity" elsewhere in this section.

In subsection (d)(1) of this section, the reference to "health" care services is substituted for the former reference to "medical" care services for consistency with subsection (d)(2) of this section.

Defined terms: "Certificate of authority" § 1-101

"Health insurance" § 1-101

"Insurer" § 1-101

"Person" § 1-101

"State" § 1-101

15-407. CONTINUATION COVERAGE FOR SURVIVING SPOUSES AND DEPENDENT CHILDREN.

(A) DEFINITIONS.

(1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.

(2) "DEPENDENT CHILD" MEANS A CHILD OF THE INSURED WHO:

(I) WAS COVERED UNDER A GROUP CONTRACT AS A QUALIFIED OR ELIGIBLE DEPENDENT OF THE INSURED IMMEDIATELY BEFORE THE DEATH OF THE INSURED; OR

(II) WAS BORN TO A QUALIFIED SECONDARY BENEFICIARY DEFINED IN PARAGRAPH (5)(I) OF THIS SUBSECTION AFTER THE DEATH OF THE INSURED.

(3) "GROUP CONTRACT" MEANS:

(I) AN INSURANCE CONTRACT OR POLICY THAT IS ISSUED OR DELIVERED IN THE STATE TO THE EMPLOYER OF THE INSURED BY AN INSURER OR NONPROFIT HEALTH SERVICE PLAN AND THAT PROVIDES GROUP HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO THE EMPLOYEES OF THE EMPLOYER ON AN EXPENSE-INCURRED BASIS; OR

(II) A CONTRACT BETWEEN THE EMPLOYER OF THE INSURED AND A HEALTH MAINTENANCE ORGANIZATION CERTIFIED UNDER TITLE 19, SUBTITLE 7 OF THE HEALTH - GENERAL ARTICLE THAT PROVIDES HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO THE EMPLOYEES OF THE EMPLOYER.