

elected by or on behalf of a qualified secondary beneficiary" is added to state expressly that which only was implied in the former law, i.e., continuation coverage is not automatic.

In subsection (e)(1) of this section, the term "authorized representative" is added for conformity with subsection (e)(3) of this section and to state expressly that which only was implied in the former law, i.e., an authorized representative may elect continuation coverage for a qualified secondary beneficiary.

Defined terms: "Commissioner" § 1-101

"County" § 1-101

"Insurance contract" § 1-101

"Insurer" § 1-101

"Policy" § 1-101

15-408. CONTINUATION COVERAGE FOR DIVORCED SPOUSES AND DEPENDENT CHILDREN.

(A) DEFINITIONS.

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

(2) "CHANGE IN STATUS" MEANS THE DIVORCE OF THE INSURED AND THE INSURED'S SPOUSE.

(3) "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 CHANGE IN STATUS; OR

(II) WAS BORN TO A QUALIFIED SECONDARY BENEFICIARY DEFINED IN PARAGRAPH (6)(I) OF THIS SUBSECTION AFTER THE CHANGE IN STATUS.

(4) "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 INSURED 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 GROUP HOSPITAL, MEDICAL, OR SURGICAL BENEFITS OFFERED TO THE INSURED.

(5) "INSURED" MEANS AN EMPLOYEE WHO IS A RESIDENT OF THE STATE AND COVERED UNDER A GROUP CONTRACT.