IF THE PROPOSED POLICY PROVIDES COVERAGE FOR CARE IN A MEDICARE-APPROVED SKILLED NURSING FACILITY, BUT THE POLICY DOES NOT PROVIDE COVERAGE FOR CARE IN OTHER NURSING HOME FACILITIES OR FOR CUSTODIAL OR REST HOME CARE, A STATEMENT SHALL BE GIVEN THAT DESCRIBES CLEARLY THOSE EXPENSES THAT THE POLICY DOES NOT COVER.

- (D) NONCOMPLIANCE WITH OTHER PROVISIONS OF SUBTITLE.
- (1) IF THE PROPOSED POLICY DOES NOT COMPLY WITH THE REQUIREMENTS OF §§ 15-904, 15-906, 15-907, AND 15-908 OF THIS SUBTITLE FOR A MEDICARE SUPPLEMENT POLICY, A STATEMENT PRINTED IN 12-POINT TYPE SHALL BE GIVEN THAT:

"THIS POLICY (OR CERTIFICATE) IS NOT A MEDICARE SUPPLEMENT POLICY (OR CERTIFICATE). IT IS NOT DESIGNED TO FILL THE 'GAPS' OF MEDICARE. IF YOU ARE ELIGIBLE FOR MEDICARE, REVIEW THE MEDICARE SUPPLEMENT BUYER'S GUIDE AVAILABLE FROM THE COMPANY".

- (2) THE STATEMENT REQUIRED BY PARAGRAPH (1) OF THIS SUBSECTION SHALL BE PRINTED ON OR ATTACHED TO THE FIRST PAGE OF:
 - (I) THE POLICY FORM OR CERTIFICATE; OR
- (II) AN OUTLINE OF COVERAGE DELIVERED TO THE INDIVIDUAL COVERED UNDER THE POLICY OR CERTIFICATE.
- (3) A CARRIER OR AGENT OF A CARRIER NEED NOT PROVIDE THE STATEMENT REQUIRED UNDER PARAGRAPH (1) OF THIS SUBSECTION FOR:
- (I) A POLICY OR CERTIFICATE THAT IS ISSUED IN ACCORDANCE WITH A CONTRACT UNDER § 1876 OF THE FEDERAL SOCIAL SECURITY ACT, 42 U.S.C. § 1395 ET SEQ.;

(II) A DISABILITY INCOME POLICY; OR

- (III) A POLICY OR CONTRACT OF ONE OR MORE EMPLOYERS OR LABOR ORGANIZATIONS OR THE TRUSTEES OF A FUND ESTABLISHED BY ONE OR MORE EMPLOYERS OR LABOR ORGANIZATIONS OR A COMBINATION OF EMPLOYERS OR LABOR ORGANIZATIONS, FOR EMPLOYEES, FORMER EMPLOYEES, A COMBINATION OF EMPLOYEES OR FORMER EMPLOYEES, MEMBERS, FORMER MEMBERS, OR A COMBINATION OF MEMBERS OR FORMER MEMBERS OF THE LABOR ORGANIZATION.
- (4) NOTWITHSTANDING PARAGRAPH (1) OF THIS SUBSECTION, THE COMMISSIONER SHALL ADOPT REGULATIONS NECESSARY TO CONFORM THIS SUBSECTION TO THE REQUIREMENTS OF APPLICABLE FEDERAL LAW.
 - (E) ACCIDENT-ONLY BENEFITS.

IF THE PROPOSED POLICY PROVIDES ACCIDENT-ONLY BENEFITS, A STATEMENT PRINTED IN 12-POINT TYPE SHALL BE GIVEN THAT CONTAINS THE LANGUAGE IN SUBSECTION (D) OF THIS SECTION AND THE FOLLOWING: