

(1) AN ELIGIBLE EMPLOYEE OR DEPENDENT WHO REQUESTS ENROLLMENT IN A HEALTH BENEFIT PLAN AFTER THE INITIAL ENROLLMENT PERIOD PROVIDED UNDER THE HEALTH BENEFIT PLAN; OR

(2) A SELF-EMPLOYED INDIVIDUAL DESCRIBED IN § 15-1203(C) OR (D) OF THIS SUBTITLE OR DEPENDENT WHO REQUESTS ENROLLMENT IN A HEALTH BENEFIT PLAN AFTER AN ANNUAL OPEN ENROLLMENT PERIOD FOR SELF-EMPLOYED INDIVIDUALS ESTABLISHED BY THE CARRIER IN ACCORDANCE WITH REGULATIONS ADOPTED BY THE COMMISSIONER.

REVISOR'S NOTE: This subsection is new language derived without substantive change from former Art. 48A, § 698(i)(1).

In item (1) of this subsection, the former phrase "under this subtitle", which modified the defined term "health benefit plan", is deleted as unnecessary because the term is defined for the subtitle.

Former Art. 48A, § 698(i)(2), which specified who may not be considered a late enrollee, is revised as a substantive provision in § 15-1208(b)(1) of this subtitle.

Defined terms: "Commissioner" § 1-101

"Eligible employee" § 15-1201

"Health benefit plan" § 15-1201

(H) POOL.

"POOL" MEANS THE MARYLAND SMALL EMPLOYER HEALTH REINSURANCE POOL ESTABLISHED UNDER THIS SUBTITLE.

REVISOR'S NOTE: This subsection formerly was Art. 48A, § 698(l).

No changes are made.

Defined terms: "Reinsurance" § 1-101

"Small employer" § 15-1201

(I) PREEXISTING CONDITION.

"PREEXISTING CONDITION" MEANS:

(1) A CONDITION EXISTING DURING A SPECIFIED PERIOD IMMEDIATELY PRECEDING THE EFFECTIVE DATE OF COVERAGE, THAT WOULD HAVE CAUSED AN ORDINARILY PRUDENT PERSON TO SEEK MEDICAL ADVICE, DIAGNOSIS, CARE, OR TREATMENT; OR

(2) A CONDITION FOR WHICH MEDICAL ADVICE, DIAGNOSIS, CARE, OR TREATMENT WAS RECOMMENDED OR RECEIVED DURING A SPECIFIED PERIOD IMMEDIATELY PRECEDING THE EFFECTIVE DATE OF COVERAGE.

REVISOR'S NOTE: This subsection formerly was Art. 48A, § 698(m).

The only changes are in style.