- (2) FOR EACH ADDITIONAL BENEFIT OFFERED UNDER THIS SUBSECTION, A CARRIER SHALL ACCEPT OR REJECT THE APPLICATION OF THE ENTIRE GROUP.
- (3) THE COMMISSIONER MAY PROHIBIT A CARRIER FROM OFFERING AN ADDITIONAL BENEFIT UNDER THIS SUBSECTION IF THE COMMISSIONER FINDS THAT THE ADDITIONAL BENEFIT WILL BE SOLD IN CONJUNCTION WITH THE STANDARD PLAN IN A MANNER DESIGNED TO PROMOTE RISK SELECTION OR UNDERWRITING PRACTICES OTHERWISE PROHIBITED BY THIS SUBTITLE.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 704(a)(6).

In subsection (a) of this section, the defined term "insurance" is substituted for the former reference to "supplemental insurance policies" because some of the types of insurance enumerated in § 15-1201(f)(3)(i) through (xiii) of this subtitle might not be considered "supplemental" insurance.

In subsection (b) of this section, the reference to "all of the provisions of this subtitle applicable to" the Standard Plan is substituted for the former reference to. "the same requirements as" the Standard Plan for clarity.

Subsection (c) of this section is revised to state expressly that the category of benefits described in the subsection is not subject to guaranteed issuance. This revision resolves a contradiction in former Art. 48A, § 704(a)(6)(i) and (ii), which proposed that the two different categories of additional benefits are subject to identical requirements but then enumerated different examples of the requirements. Since both provisions were enacted simultaneously, the omission of the requirement for guaranteed issuance in former § 704(a)(6)(ii) seemed to be a limitation, notwithstanding Art. 1, § 30 of the Code.

Defined terms: "Carrier" § 15-1201

"Commissioner" § 1-101

"Insurance" § 1-101

"Preexisting condition" § 15-1201

"Standard Plan" § 15-1201

15-1214. REIMBURSEMENT OF HOSPITALS.

NOTWITHSTANDING ANY OTHER PROVISION OF THIS SUBTITLE, HEALTH BENEFIT PLANS SHALL REIMBURSE HOSPITALS IN ACCORDANCE WITH RATES APPROVED BY THE STATE HEALTH SERVICES COST REVIEW COMMISSION.

REVISOR'S NOTE: This section formerly was Art. 48A, § 698B.

The only change is in style.

Defined term: "Health benefit plan" § 15-1201

15-1215. ELECTION TO BECOME RISK-ASSUMING CARRIER OR REINSURING CARRIER.

(A) REQUIRED.