

Defined terms: "Alzheimer's disease" § 18-101

"Long-term care insurance" § 18-101

"Preexisting condition" § 18-101

18-112. CONTINUATION OF COVERAGE OR CONVERSION OF POLICIES.

(A) IN GENERAL.

EACH GROUP POLICY OF LONG-TERM CARE INSURANCE SHALL PROVIDE COVERED INDIVIDUALS WITH A BASIS FOR CONTINUATION OF COVERAGE OR CONVERSION TO AN INDIVIDUAL POLICY OF LONG-TERM CARE INSURANCE.

(B) BASIS FOR CONTINUATION OF COVERAGE.

(1) FOR PURPOSES OF THIS SECTION, A GROUP POLICY OF LONG-TERM CARE INSURANCE PROVIDES A BASIS FOR CONTINUATION OF COVERAGE IF THE GROUP POLICY:

(I) MAINTAINS COVERAGE UNDER THE EXISTING GROUP POLICY WHEN THE COVERAGE WOULD OTHERWISE TERMINATE; AND

(II) IS SUBJECT ONLY TO THE CONTINUED TIMELY PAYMENT OF PREMIUMS.

(2) A GROUP POLICY THAT RESTRICTS BENEFITS AND SERVICES TO CERTAIN PROVIDERS OR FACILITIES OR CONTAINS INCENTIVES TO USE CERTAIN PROVIDERS OR FACILITIES MAY PROVIDE CONTINUATION BENEFITS THAT ARE SUBSTANTIALLY EQUIVALENT TO THE BENEFITS OF THE EXISTING GROUP POLICY.

(C) BASIS FOR CONVERSION OF COVERAGE.

FOR PURPOSES OF THIS SECTION, A GROUP POLICY PROVIDES A BASIS FOR CONVERSION OF COVERAGE IF THE GROUP POLICY PROVIDES FOR ISSUANCE OF A POLICY THAT PROVIDES BENEFITS THAT ARE IDENTICAL TO, SUBSTANTIALLY EQUIVALENT TO, OR IN EXCESS OF THE BENEFITS OF THE TERMINATED GROUP POLICY WITHOUT EVIDENCE OF INSURABILITY TO EACH INDIVIDUAL:

(1) WHOSE COVERAGE UNDER THE GROUP POLICY WOULD OTHERWISE BE TERMINATED FOR ANY REASON; AND

(2) WHO HAS BEEN CONTINUOUSLY INSURED UNDER THE GROUP POLICY FOR AT LEAST 6 MONTHS BEFORE THE DATE OF TERMINATION.

(D) DETERMINATION OF SUBSTANTIALLY EQUIVALENT BENEFITS.

IN DETERMINING WHETHER BENEFITS ARE SUBSTANTIALLY EQUIVALENT UNDER THIS SECTION, THE COMMISSIONER SHALL CONSIDER THE DIFFERENCE BETWEEN MANAGED CARE PLANS AND OTHER PLANS.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 645.1(a) through (d).

In subsection (a) of this section, the reference to an individual policy of