

(ii) the date on which the health maintenance organization notifies the Commissioner that it has regained capacity to deliver services to individuals or groups in that area.

(c) Financial impairment.

A carrier may not be required to offer coverage under §§ 7 and 11 of this subheading for as long as the Commissioner finds that the coverage would place the carrier in a financially impaired condition.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 704(b) through (d) (effective subject to Ch. 9, §§ 5 and 7, Acts of 1993, as amended by Ch. 258, § 3, Acts of 1994).

In subsection (b)(1)(iii) of this section, the former phrase "within the area", which modified "capacity", is deleted as unnecessary in light of the use of the phrase "within an area" at the beginning of that item.

In subsection (b)(2)(ii) of this section, the reference to the "area" in which a health maintenance organization has the "capacity to deliver services to individuals or groups" is added for clarity.

Also in subsection (b)(2)(ii) of this section, the specific reference to a "health maintenance organization" is substituted for the former general reference to a "carrier" for consistency within that subsection.

Defined terms: "Carrier" § 1  
"Commissioner" IN § 1-101

9. Approval of proposed health benefit plans.

(a) Filing required.

To sell health benefit plans to individuals or groups in the State, a carrier shall file its proposed health benefit plans with the Commissioner on or before the date designated by the Commissioner.

(b) Deemed approval.

Unless the Commissioner previously has disapproved a health benefit plan, it is deemed approved 60 days after filing with the Commissioner.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 704(e) (effective subject to Ch. 9, §§ 5 and 7, Acts of 1993, as amended by Ch. 258, § 3, Acts of 1994).

Defined terms: "Carrier" § 1  
"Commissioner" IN § 1-101  
"Health benefit plan" § 1

10. Renewal of health benefit plans.

(a) In general.