

**REVISOR'S NOTE:** This section is new language derived without substantive change from former Art. 48A, § 707(a) through (j) (effective subject to Ch. 9, §§ 5 and 7, Acts of 1993, as amended by Ch. 258, § 3, Acts of 1994).

In subsection (b) of this section, the reference to the reinsurance of claims "in accordance with this subheading" is substituted for the former reference to the reinsurance of claims "of eligible health benefit plans" for clarity. The applicable provisions of this subheading specify how claims are to be reinsured but they do not clearly specify which health benefit plans are "eligible" for reinsurance. See §§ 14 and 15 of this subheading.

Defined terms: "Board" § 1

"Carrier" § 1

"Commissioner" IN § 1-101

"Health benefit plan" § 1

"Health insurance" IN § 1-101

"Pool" § 1

"Reinsurance" IN § 1-101

"Reinsuring carrier" § 1

#### 14. Reinsurance.

##### (a) In general.

A reinsuring carrier may reinsure with the Pool as provided in this section.

##### (b) Minimum level of reinsurance.

At a minimum, the Pool shall reinsure up to the level of coverage specified under the Standard Plan.

##### (c) Timing of reinsurance of groups.

A reinsuring carrier may reinsure an entire group within 60 days of commencement of the group's coverage under a health benefit plan.

##### (d) Timing of reinsurance of individuals.

(1) A reinsuring carrier may reinsure a group member or dependent within 60 days after commencement of the group's coverage.

(2) A reinsuring carrier may reinsure a newly eligible group member or dependent within 60 days after commencement of coverage of the new member or dependent.

##### (e) Reimbursement of claims.

(1) The Pool may not reimburse a reinsuring carrier with respect to the claims of an individual until the reinsuring carrier has incurred claims for the individual of \$5,000 in a calendar year for benefits covered by the Pool.