

AND

1. COVERAGE ONLY FOR A SPECIFIED DISEASE OR ILLNESS;

INSURANCE; OR

2. HOSPITAL INDEMNITY OR OTHER FIXED INDEMNITY

(IV) THE FOLLOWING BENEFITS IF OFFERED AS A SEPARATE INSURANCE POLICY:

1. MEDICARE SUPPLEMENTAL HEALTH INSURANCE (AS DEFINED UNDER § 1882(G)(1) OF THE SOCIAL SECURITY ACT);

2. COVERAGE SUPPLEMENTAL TO THE COVERAGE PROVIDED UNDER CHAPTER 55 OF TITLE 10, UNITED STATES CODE; AND

3. SIMILAR SUPPLEMENTAL COVERAGE PROVIDED TO COVERAGE UNDER AN EMPLOYER SPONSORED PLAN.

(K) "HEALTH STATUS-RELATED FACTOR" MEANS A FACTOR RELATED TO:

(1) HEALTH STATUS;

(2) MEDICAL CONDITION;

(3) CLAIMS EXPERIENCE;

(4) RECEIPT OF HEALTH CARE;

(5) MEDICAL HISTORY;

(6) GENETIC INFORMATION;

(7) EVIDENCE OF INSURABILITY INCLUDING CONDITIONS ARISING OUT OF ACTS OF DOMESTIC VIOLENCE; OR

(8) DISABILITY.

(L) "LATE ENROLLEE" MEANS A MEMBER, SUBSCRIBER, OR DEPENDENT WHO ENROLLS IN A GROUP HEALTH BENEFIT PLAN OTHER THAN DURING:

(1) THE FIRST PERIOD IN WHICH THE INDIVIDUAL IS ELIGIBLE TO ENROLL UNDER THE PLAN; OR

(2) A SPECIAL ENROLLMENT PERIOD.

(M) "PREEXISTING CONDITION" MEANS:

~~(1) A CONDITION EXISTING DURING A SPECIFIED PERIOD IMMEDIATELY PRECEDING THE EFFECTIVE DATE OF COVERAGE THAT WOULD HAVE CAUSED ANY 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 THIS COVERAGE A CONDITION~~