

754.

IN ADDITION TO ANY OTHER REQUIREMENTS UNDER THIS ARTICLE, A CARRIER THAT OFFERS INDIVIDUAL HEALTH BENEFIT PLANS IN THIS STATE SHALL:

(1) HAVE DEMONSTRATED THE CAPACITY TO ADMINISTER THE INDIVIDUAL HEALTH BENEFIT PLANS, INCLUDING ADEQUATE NUMBERS AND TYPES OF ADMINISTRATIVE STAFF;

(2) HAVE A SATISFACTORY GRIEVANCE PROCEDURE AND ABILITY TO RESPOND TO CALLS, QUESTIONS, AND COMPLAINTS FROM ENROLLEES OR INSURED; AND

(3) DESIGN POLICIES TO HELP ENSURE THAT ENROLLEES OR INSURED HAVE ADEQUATE ACCESS TO PROVIDERS OF HEALTH CARE.

755.

A CARRIER MAY NOT OFFER ANY INDIVIDUAL HEALTH BENEFIT PLANS IN THIS STATE UNLESS THE CARRIER OFFERS, AND ACTIVELY MARKETS, THE POLICIES REQUIRED BY THIS SUBTITLE.

756.

(A) UNLESS A CARRIER MAKES AN ELECTION UNDER § 757 OF THIS SUBTITLE, THE CARRIER MAY NOT:

(1) DECLINE TO OFFER COVERAGE TO, OR DENY ENROLLMENT OF AN ELIGIBLE INDIVIDUAL; OR

(2) IMPOSE ANY PREEXISTING CONDITION PROVISION ON AN ELIGIBLE INDIVIDUAL

(B) (1) A CARRIER THAT MAKES AN ELECTION UNDER § 757 OF THIS SUBTITLE MAY CHOOSE TO OFFER AT LEAST TWO DIFFERENT POLICY FORMS, BOTH OF WHICH ARE DESIGNED FOR, MADE GENERALLY AVAILABLE TO, ACTIVELY MARKETED TO, AND ENROLL, BOTH ELIGIBLE INDIVIDUALS AND OTHER INDIVIDUALS.

(2) POLICY FORMS THAT HAVE DIFFERENT COST-SHARING ARRANGEMENTS OR DIFFERENT RIDERS SHALL BE CONSIDERED TO BE DIFFERENT POLICY FORMS.

(C) POLICY FORMS SHALL COMPLY WITH THE REQUIREMENTS OF THIS SUBTITLE.

757.

(A) NO LATER THAN JULY 1, 1997, A CARRIER THAT INTENDS TO OFFER TWO POLICY FORMS SHALL SUBMIT IN WRITING TO THE COMMISSIONER BOTH:

(1) AN ELECTION WHETHER TO OFFER: