- 2. COVERAGE SUPPLEMENTAL TO THE COVERAGE PROVIDED UNDER CHAPTER 55 OF TITLE 10, UNITED STATES CODE; AND
- 3. <u>SIMILAR SUPPLEMENTAL COVERAGE PROVIDED TO</u> 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 AN 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 THAT WAS PRESENT BEFORE THE DATE OF ENROLLMENT FOR COVERAGE, WHETHER OR NOT ANY MEDICAL ADVICE, DIAGNOSIS, CARE, OR TREATMENT WAS RECOMMENDED OR RECEIVED BEFORE THAT DATE.
- (N) "PREEXISTING CONDITION PROVISION" MEANS A PROVISION IN A HEALTH BENEFIT PLAN THAT DENIES, EXCLUDES, OR LIMITS BENEFITS FOR AN ENROLLEE FOR EXPENSES OR SERVICES RELATED TO A PREEXISTING CONDITION.
- (O) "SECRETARY" MEANS THE SECRETARY OF THE FEDERAL DEPARTMENT OF HEALTH AND HUMAN SERVICES.