

PROGRAM, OTHER THAN THE PLAN, THAT IS PROVIDED TO A RESIDENT OF THE STATE BY ANY PERSON, INCLUDING AN EMPLOYER, ASSOCIATION, INSURER, NONPROFIT HEALTH SERVICE PLAN, OR HEALTH MAINTENANCE ORGANIZATION, AND IS WRITTEN ON AN EXPENSE-INCURRED BASIS OR IS WITH A HEALTH MAINTENANCE ORGANIZATION; OR

(2) IS A QUALIFIED BENEFICIARY WHO WOULD OTHERWISE BE ENTITLED BY REASON OF THIS ARTICLE TO COVERAGE UNDER A GROUP CONTRACT EXCEPT FOR:

(I) THE NONEXISTENCE OF A GROUP CONTRACT; OR

(II) THE EXPIRATION OF COVERAGE UNDER A GROUP CONTRACT FOR THE QUALIFIED BENEFICIARY, REGARDLESS OF CONTINUED ELIGIBILITY FOR COVERAGE.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, §§ 612 and 610(c), (d), and (g).

The former definitions of "group plan", "member", and "termination date" in former Art. 48A, § 610(c), (d), and (g) are merged with the provisions of former § 612 to clarify the function of and eligibility requirements for the Plan.

In subsection (b)(1)(i) of this section, the reference to the Secretary of "Labor, Licensing, and Regulation" is substituted for the former obsolete reference to the Secretary of "Economic and Employment Development" in accordance with Ch. 120, Acts of 1995.

In subsection (b)(2) of this section, the former reference to "health" coverage under a group contract is deleted for clarity and consistency within this section because the coverage to be provided is for hospital, medical, and surgical benefits.

Defined terms: "Group contract" § 14-301

"Insurer" § 1-101

"Person" § 1-101

"Plan" § 14-301

"Premium" § 1-101

"Qualified beneficiary" § 14-301

14-304. CHOICE OF UNDERWRITER.

SUBJECT TO THE PROCEDURES ESTABLISHED IN DIVISION II OF THE STATE FINANCE AND PROCUREMENT ARTICLE, THE COMMISSIONER SHALL CHOOSE AN AUTHORIZED INSURER TO UNDERWRITE THE PLAN.

REVISOR'S NOTE: This section formerly was Art. 48A, § 613.

The only change is in style.

Defined terms: "Authorized insurer" § 1-101

"Commissioner" § 1-101