

(3) THAT A RENEWAL MAY NOT BE REFUSED SOLELY BECAUSE OF A CHANGE IN THE HEALTH OR PHYSICAL OR MENTAL CONDITION OF THE INSURED; AND

(4) UNLESS OMITTED AT THE INSURER'S OPTION, THAT THE RIGHT TO REFUSE RENEWAL OF A POLICY OF HEALTH INSURANCE THAT WAS REINSTATED AFTER LAPSE MAY NOT BE EXERCISED SO AS TO TAKE EFFECT BEFORE THE RENEWAL DATE OCCURRING ON, OR AFTER AND NEAREST, EACH ANNIVERSARY OF THE LAST REINSTATEMENT.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 463.

Defined terms: "Health insurance" § 1-101

"Insurance" § 1-101

"Insurer" § 1-101

"Policy" § 1-101

"Premium" § 1-101

15-204. AGE LIMIT; MISSTATEMENT OF AGE.

(A) AGE LIMIT.

IF A POLICY OF HEALTH INSURANCE ESTABLISHES, AS AN AGE LIMIT OR OTHERWISE, A DATE AFTER WHICH THE COVERAGE PROVIDED BY THE POLICY WILL NOT BE EFFECTIVE, AND THE DATE FALLS WITHIN A PERIOD FOR WHICH THE INSURER ACCEPTS A PREMIUM FOR THE POLICY, OR IF THE INSURER ACCEPTS A PREMIUM FOR THE POLICY AFTER THAT DATE, THE COVERAGE PROVIDED BY THE POLICY CONTINUES IN EFFECT UNTIL THE END OF THE PERIOD FOR WHICH THE INSURER HAS ACCEPTED THE PREMIUM.

(B) MISSTATEMENT OF AGE.

IF THE AGE OF THE INSURED IS MISSTATED AND, ACCORDING TO THE CORRECT AGE OF THE INSURED, THE COVERAGE PROVIDED BY THE POLICY WOULD NOT HAVE BECOME EFFECTIVE OR WOULD HAVE CEASED BEFORE THE ACCEPTANCE OF A PREMIUM FOR THE POLICY, THE LIABILITY OF THE INSURER IS LIMITED TO THE REFUND, ON REQUEST, OF THE PREMIUMS PAID FOR THE PERIOD NOT COVERED BY THE POLICY.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 468.

Throughout this section, the references to a premium "for the policy" are added for clarity.

In subsection (a) of this section, the reference to a policy "of health insurance" is added to clarify the applicability of this provision.

Defined terms: "Insurer" § 1-101

"Policy" § 1-101

"Premium" § 1-101