H. OTHER SIMILAR INSURANCE COVERAGE, SPECIFIED IN FEDERAL REGULATIONS ISSUED PURSUANT TO P.L. 104–191, UNDER WHICH BENEFITS FOR MEDICAL CARE ARE SECONDARY OR INCIDENTAL TO OTHER INSURANCE BENEFITS;

2. THE FOLLOWING BENEFITS IF THEY ARE PROVIDED UNDER A SEPARATE POLICY, CERTIFICATE, OR CONTRACT OF INSURANCE OR ARE OTHERWISE NOT AN INTEGRAL PART OF A PLAN:

A. LIMITED SCOPE DENTAL OR VISION BENEFITS;

B. BENEFITS FOR LONG–TERM CARE, NURSING HOME CARE, HOME HEALTH CARE, COMMUNITY–BASED CARE, OR ANY COMBINATION OF THESE BENEFITS; OR

C. SUCH OTHER SIMILAR LIMITED BENEFITS AS ARE SPECIFIED IN FEDERAL REGULATIONS ISSUED PURSUANT TO P.L. 104–191;

3. THE FOLLOWING BENEFITS IF OFFERED AS INDEPENDENT, NONCOORDINATED BENEFITS:

A. COVERAGE ONLY FOR A SPECIFIED DISEASE OR ILLNESS; OR

B. HOSPITAL INDEMNITY OR OTHER FIXED INDEMNITY INSURANCE; OR

4. THE FOLLOWING BENEFITS IF OFFERED AS A SEPARATE INSURANCE POLICY:

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

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

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

~~(3)~~ *(4)* "SUBSTANTIAL, AVAILABLE, AND AFFORDABLE COVERAGE" REFERS TO THE COVERAGE THAT IS OFFERED IN THE NONGROUP HEALTH INSURANCE MARKET UNDER THE REGULATIONS ADOPTED UNDER § 15–606 OF THIS ARTICLE.

(B) THIS SECTION APPLIES TO ~~CARRIERS~~ *EACH CARRIER* THAT ~~OFFER~~ *OFFERS A* MEDICALLY UNDERWRITTEN HEALTH ~~INSURANCE~~ *BENEFIT PLAN* IN THE NONGROUP MARKET IN THE STATE.

(C) (1) IF A CARRIER DENIES *COVERAGE UNDER A* MEDICALLY UNDERWRITTEN HEALTH ~~INSURANCE FOR~~ *BENEFIT PLAN TO* AN INDIVIDUAL IN THE NONGROUP MARKET, THE CARRIER SHALL PROVIDE THE INDIVIDUAL WITH SPECIFIC