

[(s)] (Q) "Waiting period" means the period of time that must pass before an individual is eligible to be covered for benefits under the terms of a group health benefit plan.

[(t)] (R) (1) "Weighted average" means the average actuarial value of the benefits provided by:

(i) all the health insurance coverages issued by the carrier in this State in the individual market during the previous calendar year, weighted by enrollment for the different coverages; or

(ii) all the health insurance coverages issued by all carriers in this State in the individual market, if the data are available, during the previous calendar year, weighted by enrollment for the different coverages.

(2) "Weighted average" does not include coverages issued under this subtitle.

[15-1304.

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.]

[15-1305.

(a) Unless a carrier makes an election under § 15-1306 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 § 15-1306 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.]

[15-1306.

(a) A carrier that intends to offer two policy forms shall submit in writing to the Commissioner both:

(1) an election whether to offer:

(i) a high level and low level policy form, each of which includes benefits substantially similar to other individual health insurance coverage offered by the carrier in this State; or