

Defined terms: "Benefit year" § 8-101
 "Benefits" § 8-101 "Claimant" § 8-101
 "Week" § 8-101

8-805. CLAIMS FOR BENEFITS.

(A) IN GENERAL.

TO APPLY FOR BENEFITS AN INDIVIDUAL SHALL FILE A CLAIM FOR BENEFITS IN ACCORDANCE WITH REGULATIONS ADOPTED BY THE SECRETARY.

(B) REQUIRED INFORMATION.

A CLAIMANT SHALL DISCLOSE WHETHER THE CLAIMANT OWES CHILD SUPPORT.

(C) NOTICE ABOUT INSURANCE.

AT THE TIME A CLAIM IS MADE, THE SECRETARY SHALL GIVE EACH CLAIMANT A NOTICE IN THE FORM REQUIRED BY THE INSURANCE COMMISSIONER THAT STATES THAT THE CLAIMANT MAY BE ENTITLED TO CONTINUATION OF GROUP HEALTH INSURANCE BENEFITS UNDER ARTICLE 48A, § 490-I OF THE CODE.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 95A, §§ 5A(b), and 7(b) and (j), and the second sentence of § 11(a)(1).

Subsection (b) of this section is revised as a continuing duty to disclose a child support obligation, rather than a duty only to disclose the information the first time the individual files a claim. Presumably, a claimant who becomes obligated to pay child support while collecting benefits has a duty to disclose the obligation.

Defined terms: "Benefits" § 8-101
 "Claimant" § 8-101 "Secretary" § 8-101

8-806. DETERMINATION OF CLAIMS.

(A) IN GENERAL.

(1) EXCEPT AS PROVIDED IN SUBSECTION (B) OF THIS SECTION A CLAIMS EXAMINER PROMPTLY SHALL MAKE A DETERMINATION ON A CLAIM FILED UNDER § 8-805(A) OF THIS SUBTITLE.

(2) WHENEVER A DETERMINATION INVOLVES RESOLUTION OF A DISPUTE OF MATERIAL FACT, A CLAIMS EXAMINER SHALL:

(I) CONDUCT A PREDETERMINATION PROCEEDING; AND

(II) GIVE EACH PARTY NOTICE OF THE TIME AND PLACE OF THE PROCEEDING.