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§12–203.

(a) (1) This section applies to a form for a life insurance or health insurance policy, an annuity contract, an application for that policy or contract that is required to be written, a rider, or an endorsement that:

(i) is delivered or issued for delivery in the State; or

(ii) is used by domestic insurers for delivery in a jurisdiction outside the State, if:

1. the insurance supervisory official of the jurisdiction informs the Commissioner that the form is not subject to approval or disapproval by the official; and

2. the Commissioner requires the form to be submitted to the Commissioner for approval.

(2) This section does not apply to unique riders, endorsements, or forms that are:

(i) designed for and relate to the manner of distribution of benefits or to the reservation of rights and benefits under life insurance or health insurance policies or annuity contracts; and

(ii) used at the request of the individual policyholder, contract holder, or certificate holder.

(b) (1) A form subject to this section may not be delivered or issued for delivery in the State, unless the form has been filed with and approved by the Commissioner.

(2) An individual certificate may not be used in connection with a group or blanket insurance policy or group annuity contract unless the form for the certificate has been filed with and approved by the Commissioner.

(c) (1) The filing of a form with the Commissioner shall be made at least 60 days before delivery.

(2) Approval by the Commissioner of the form constitutes a waiver of any unexpired part of the filing period.

(3) The Commissioner may extend the initial filing period up to an additional 30 days if the Commissioner gives notice of the extension before the initial filing period ends.

(4) The form is deemed approved unless the Commissioner affirmatively approves or disapproves it before the end of the initial filing period or any extended period.

(5) At any time, the Commissioner may withdraw approval of a form, if the Commissioner:

(i) gives prior notice of the withdrawal;

(ii) shows cause for the withdrawal; and

(iii) states the effective date of the withdrawal in the notice.

(6) The withdrawal of approval shall take effect at least 20 days after the withdrawal notice is given.

(d) (1) The Commissioner may order an exemption from this section for as long as the Commissioner considers proper for an insurance document or form or type of insurance document or form if the Commissioner finds that:

(i) this section is not practicably applicable; or

(ii) the filing and approval of the document or form or type of document or form are not desirable or necessary to protect the public.

(2) (i) The Commissioner may adopt regulations to allow a type or kind of form to be effective upon receipt of the filing by the Commissioner.

(ii) If an insurer uses a form which becomes effective in accordance with the provisions of subparagraph (i) of this paragraph and the form would be subject to disapproval under § 12-205(b) of this subtitle, the Commissioner may:

1. subsequently disapprove the form; and

2. impose on the insurer a penalty under § 4-113 of this article.

(iii) If an insurer files a form with the Commissioner which becomes effective in accordance with the provisions of subparagraph (i) of this paragraph, the insurer shall pay the applicable filing fee provided in § 2-112 of this article.

(e) (1) The Commissioner shall approve life insurance policies, health insurance policies, and annuity contracts in loose-leaf form and shall approve alternate pages submitted separately for use with the policies and contracts if their provisions comply with this article.

(2) Whenever alternate pages are filed after the initial policies or contracts are approved, the Commissioner may require that those policies or contracts also be submitted with an explanation of the intended usage of the alternate pages.

(3) A combination of approved pages may form a complete policy or contract if a schedule is filed with the Commissioner that shows the pages to be used to form each particular policy or contract.

(f) The applicable standards for forms used by domestic insurers for delivery in the State shall apply to forms used by domestic insurers for delivery outside the State.

(g) By regulation, the Commissioner shall adopt the language and format for standard provisions required under § 12-102(a) of this title for contracts and policies issued by insurers, nonprofit health service plans, and health maintenance organizations.

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