# HOUSE BILL 235

C3

9lr0790

#### By: **Delegates Tarrant, Bromwell, Kullen, V. Turner, and Weldon** Introduced and read first time: January 28, 2009 Assigned to: Health and Government Operations

## A BILL ENTITLED

1 AN ACT concerning

### 2 Health Insurance – Rescission of Contracts and Certificates – Restrictions

- FOR the purpose of prohibiting certain carriers from rescinding a contract or
  certificate under certain circumstances; requiring the carrier to have the burden
  of persuasion that a rescission complies with certain provisions of this Act;
  applying certain provisions of this Act to health maintenance organizations;
  defining certain terms; providing for the application of this Act; and generally
  relating to the rescission of health insurance contracts and certificates.
- 9 BY adding to
- 10 Article Health General
- 11 Section 19–706(ttt)
- 12 Annotated Code of Maryland
- 13 (2005 Replacement Volume and 2008 Supplement)
- 14 BY adding to
- 15 Article Insurance
- Section 15–1105 to be under the amended subtitle "Subtitle 11. Miscellaneous
   Health Insurance Policies and Contracts and Health Benefit Plans"
- 18 Annotated Code of Maryland
- 19 (2006 Replacement Volume and 2008 Supplement)
- 20 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 21 MARYLAND, That the Laws of Maryland read as follows:
- 22

Article – Health – General

23 19–706.

# (TTT) THE PROVISIONS OF § 15–1105 OF THE INSURANCE ARTICLE APPLY TO HEALTH MAINTENANCE ORGANIZATIONS.

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW. [Brackets] indicate matter deleted from existing law.



	2 <b>HOUSE BILL 235</b>
1	Article – Insurance
$2 \\ 3$	Subtitle 11. Miscellaneous Health Insurance Policies AND CONTRACTS AND HEALTH BENEFIT PLANS.
4	15–1105.
5 6	(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.
7	(2) "CARRIER" MEANS:
8	(I) AN INSURER;
9	(II) A NONPROFIT HEALTH SERVICE PLAN; OR
10	(III) A HEALTH MAINTENANCE ORGANIZATION.
$11 \\ 12 \\ 13$	(3) "EVIDENCE OF INDIVIDUAL INSURABILITY" MEANS MEDICAL OR OTHER INFORMATION THAT INDICATES HEALTH STATUS AND IS USED TO DETERMINE WHETHER COVERAGE OF AN INDIVIDUAL IS TO BE:
14	(I) ISSUED OR DENIED; OR
15	(II) ISSUED WITH OR WITHOUT AN EXCLUSIONARY RIDER.
16	(4) "Health benefit plan" has the meaning stated in §
17	15-1301 OF THIS TITLE.
18	(B) IF A CARRIER CONDITIONS COVERAGE FOR A HEALTH BENEFIT
19	PLAN ON EVIDENCE OF INDIVIDUAL INSURABILITY, THE CARRIER MAY NOT
20	RESCIND A CONTRACT OR A CERTIFICATE ON THE BASIS OF WRITTEN
21	INFORMATION SUBMITTED ON OR WITH, OR OMITTED FROM, AN APPLICATION
22 92	FOR THE HEALTH BENEFIT PLAN UNLESS THE CARRIER COMPLETED MEDICAL
23 24	UNDERWRITING AND RESOLVED ALL MEDICAL QUESTIONS RELATED TO THE
$\frac{24}{25}$	WRITTEN INFORMATION SUBMITTED ON OR WITH, OR OMITTED FROM, THE APPLICATION BEFORE ISSUING THE HEALTH BENEFIT PLAN.
20	(a) The appendix is the two properties and the second states and

(C) THE CARRIER SHALL HAVE THE BURDEN OF PERSUASION THAT ITS
 RESCISSION OF A HEALTH BENEFIT PLAN COMPLIES WITH SUBSECTION (B) OF
 THIS SECTION.

1 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all 2 policies, contracts, certificates, and health benefit plans issued, delivered, or renewed 3 in the State on or after October 1, 2009.

4 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect 5 October 1, 2009.