Bill No.: ______________________  Drafted by: Departmental
Requested: ___________________  Typed by: Fran
Committee: ___________________  Stored – 10/11/19
By: Leave Blank (By Request – Departmental – Maryland Insurance Administration)

A BILL ENTITLED

AN ACT concerning

Health Insurance – Technical Correction and Required Conformity With Federal Law

FOR the purpose of requiring a certain carrier to provide an open enrollment period for certain individuals who gain access to certain health plans as a result of a permanent move and who had certain types of coverage as described in certain federal regulations during a certain period of time; and generally relating to health insurance and required conformity with federal law.

BY repealing and reenacting, without amendments,

Article – Insurance
Section 15–1208.2(d)(1)
Annotated Code of Maryland
(2017 Replacement Volume and 2019 Supplement)

BY repealing and reenacting, with amendments,

Article – Insurance
Section 15–1208.2(d)(4)(x)
Annotated Code of Maryland
(2017 Replacement Volume and 2019 Supplement)

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.
[Brackets] indicate matter deleted from existing law.
SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
That the Laws of Maryland read as follows:

Article – Insurance

15–1208.2.

(d) (1) A carrier shall provide an open enrollment period for each individual
who experiences a triggering event described in paragraph (4) of this subsection.

(4) A triggering event occurs when:

(x) an eligible employee or dependent gains access to new qualified
health plans as a result of a permanent move and either:

1. had minimum essential coverage as described in 26 C.F.R.
§ 1.5000a–1(b) for 1 or more days during the 60 days before the date of the permanent move;

2. lived in a foreign country or in a United States territory
for 1 or more days during the 60 days before the date of the permanent move; [or]

3. lived in a service area where no qualified health plan was
available through the Exchange:

A. for 1 or more days during the 60 days before the date of
the permanent move; or

B. during the eligible employee’s or dependent’s most recent
preceding open enrollment period or special enrollment period;

4. HAD COVERAGE FOR PRENATAL CARE OR SERVICES
AS DESCRIBED IN 45 C.F.R. § 155.420(D)(1)(III) FOR 1 OR MORE DAYS DURING THE
60 DAYS BEFORE THE DATE OF THE PERMANENT MOVE; OR

5. HAD MEDICALLY NEEDY COVERAGE AS DESCRIBED IN
45 C.F.R. § 155.420(D)(1)(IV) FOR 1 OR MORE DAYS DURING THE 60 DAYS BEFORE
THE DATE OF THE PERMANENT MOVE.
SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2020.