6.6.5079H PREEXISTING CONDITIONS - PERMISSIBLE RESTRICTIONS IN GROUP PLANS OTHER THAN SMALL EMPLOYER PLANS

(1) A group health plan or a health insurance issuer offering group health insurance coverage may not exclude coverage for a preexisting condition except as set forth in 33-22-514, MCA, and this rule.

(2) For purposes of a preexisting condition exclusion, medical advice, diagnosis, care, or treatment may be taken into account only if it is recommended by, or received from, an individual licensed or similarly authorized to provide such services under state law and operating within the scope of practice authorized by state law. A negative diagnosis does not constitute medical advice, diagnosis, care, or treatment for purposes of determining whether there is a preexisting condition.

(3) A preexisting condition exclusionary period may not exceed more than 12 months after the enrollment date, including exclusionary periods for late enrollees.

(4) Exclusionary riders are not permitted.

(5) The following may not be excluded as a preexisting condition:

(a) Genetic information in the absence of diagnosis of the condition related to the genetic information;

(b) Pregnancy;

(c) Adopted children as set forth in 33-22-130, MCA; and

(d) Newborns as set forth in 33-22-504, MCA.

(6) A group health plan, and health insurance issuer offering group health insurance under the plan, may not impose a preexisting condition exclusion with respect to a participant or dependent of the participant before notifying the participant, in writing, of the existence and terms of any preexisting condition exclusion under the plan and of the rights of individuals to demonstrate creditable coverage (and any applicable waiting periods) . The description of the rights of individuals to demonstrate creditable coverage includes a description of the right of the individual to request a certificate from a prior plan or issuer, if necessary, and a statement that the current plan or issuer will assist in obtaining a certificate from any prior plan or issuer, if necessary.

Authorizing statute(s): Sec. 33-22-143, MCA

Implementing statute(s): Sec. 33-22-514, MCA

History: NEW, 1998 MAR p. 1698, Eff. 6/26/98.