

REFERENCE TITLE: insurance; adult children; continued coverage

State of Arizona  
House of Representatives  
Forty-eighth Legislature  
First Regular Session  
2007

## **HB 2680**

Introduced by  
Representatives Lopes, Sinema: Ableser, Pancrazi, Prezelski, Saradnik

AN ACT

AMENDING TITLE 20, CHAPTER 4, ARTICLE 3, ARIZONA REVISED STATUTES, BY ADDING SECTION 20-846; AMENDING TITLE 20, CHAPTER 4, ARTICLE 9, ARIZONA REVISED STATUTES, BY ADDING SECTION 20-1067; AMENDING TITLE 20, CHAPTER 6, ARTICLE 4, ARIZONA REVISED STATUTES, BY ADDING SECTION 20-1383; RELATING TO HEALTH INSURANCE COVERAGE.

(TEXT OF BILL BEGINS ON NEXT PAGE)

1 Be it enacted by the Legislature of the State of Arizona:

2 Section 1. Title 20, chapter 4, article 3, Arizona Revised Statutes,  
3 is amended by adding section 20-846, to read:

4 20-846. Coverage for certain dependents until age thirty by  
5 hospital or medical service corporation; definition

6 A. ON APPLICATION OF THE DEPENDENT AS PRESCRIBED IN SUBSECTION B, A  
7 HOSPITAL SERVICE CORPORATION OR A MEDICAL SERVICE CORPORATION THAT PROVIDES  
8 COVERAGE FOR A SUBSCRIBER'S DEPENDENT UNDER WHICH COVERAGE OF THE DEPENDENT  
9 TERMINATES AT A SPECIFIC AGE BEFORE THE DEPENDENT'S THIRTIETH BIRTHDAY SHALL  
10 PROVIDE COVERAGE TO THE DEPENDENT AFTER THAT SPECIFIC AGE UNTIL THE  
11 DEPENDENT'S THIRTIETH BIRTHDAY.

12 B. A DEPENDENT WHO IS COVERED BY A SUBSCRIBER'S CONTRACT, WHICH  
13 COVERAGE UNDER THE CONTRACT TERMINATES AT A SPECIFIC AGE BEFORE THE  
14 DEPENDENT'S THIRTIETH BIRTHDAY, MAY MAKE A WRITTEN ELECTION FOR COVERAGE AS A  
15 DEPENDENT PURSUANT TO THIS SECTION UNTIL THE DEPENDENT'S THIRTIETH BIRTHDAY:

16 1. WITHIN THIRTY DAYS BEFORE THE TERMINATION OF COVERAGE AT THE  
17 SPECIFIC AGE PROVIDED IN THE CONTRACT.

18 2. WITHIN THIRTY DAYS AFTER MEETING THE REQUIREMENTS FOR DEPENDENT  
19 STATUS AND WHEN COVERAGE FOR THE DEPENDENT UNDER THE CONTRACT PREVIOUSLY  
20 TERMINATED.

21 3. DURING AN OPEN ENROLLMENT PERIOD, AS PROVIDED PURSUANT TO THE  
22 CONTRACT, IF THE DEPENDENT MEETS THE REQUIREMENT FOR DEPENDENT STATUS DURING  
23 THE OPEN ENROLLMENT PERIOD.

24 C. COVERAGE FOR A DEPENDENT WHO MAKES A WRITTEN ELECTION FOR COVERAGE  
25 PURSUANT TO SUBSECTION B:

26 1. CONSISTS OF COVERAGE THAT IS IDENTICAL TO THE COVERAGE PROVIDED TO  
27 THAT DEPENDENT BEFORE THE TERMINATION OF COVERAGE AT THE SPECIFIC AGE  
28 PROVIDED IN THE CONTRACT. IF THE COVERAGE IS MODIFIED UNDER THE CONTRACT FOR  
29 ANY SIMILARLY SITUATED DEPENDENTS FOR COVERAGE BEFORE THE TERMINATION OF  
30 COVERAGE AT THE SPECIFIC AGE PROVIDED IN THE CONTRACT, THE COVERAGE SHALL  
31 ALSO BE MODIFIED IN THE SAME MANNER FOR THE DEPENDENT.

32 2. SHALL NOT BE CONDITIONED ON, OR DISCRIMINATE ON THE BASIS OF, LACK  
33 OF EVIDENCE OF INSURABILITY.

34 D. THE SUBSCRIBER'S CONTRACT MAY REQUIRE PAYMENT OF A PREMIUM BY THE  
35 SUBSCRIBER OR DEPENDENT, AS APPROPRIATE, FOR ANY PERIOD OF COVERAGE RELATING  
36 TO A DEPENDENT'S WRITTEN ELECTION FOR COVERAGE PURSUANT TO SUBSECTION B. THE  
37 PAYMENT SHALL NOT EXCEED ONE HUNDRED TWO PER CENT OF THE APPLICABLE PORTION  
38 OF THE PREMIUM PREVIOUSLY PAID FOR THAT DEPENDENT'S COVERAGE UNDER THE  
39 CONTRACT BEFORE THE TERMINATION OF COVERAGE AT THE SPECIFIC AGE PROVIDED IN  
40 THE CONTRACT. THE DIRECTOR, PURSUANT TO RULE, SHALL DETERMINE THE APPLICABLE  
41 PORTION OF THE PREMIUM PREVIOUSLY PAID FOR THE DEPENDENT'S COVERAGE UNDER THE  
42 CONTRACT BASED ON THE DIFFERENCE BETWEEN THE CONTRACT'S RATING TIER FOR ADULT  
43 AND DEPENDENT COVERAGE OR FAMILY COVERAGE, AS APPROPRIATE, AND SINGLE  
44 COVERAGE, OR BASED ON ANY OTHER FORMULA OR DEPENDENT RATING TIER DEEMED  
45 APPROPRIATE BY THE DIRECTOR THAT PROVIDES A SUBSTANTIALLY SIMILAR RESULT. AT

1 THE ELECTION OF THE PAYOR, THE PAYOR MAY MAKE PAYMENT OF THE PREMIUM IN  
2 MONTHLY INSTALLMENTS.

3 E. COVERAGE FOR A DEPENDENT PROVIDED PURSUANT TO THIS SECTION SHALL BE  
4 PROVIDED UNTIL THE EARLIER OF THE FOLLOWING:

5 1. THE DEPENDENT IS DISQUALIFIED FOR DEPENDENT STATUS.

6 2. THE DATE ON WHICH COVERAGE CEASES UNDER THE CONTRACT BY REASON OF A  
7 FAILURE TO MAKE A TIMELY PAYMENT OF ANY PREMIUM REQUIRED UNDER THE CONTRACT  
8 BY THE SUBSCRIBER OR DEPENDENT FOR COVERAGE PROVIDED PURSUANT TO THIS  
9 SECTION. THE PAYMENT OF ANY PREMIUM SHALL BE CONSIDERED TO BE TIMELY IF MADE  
10 WITHIN THIRTY DAYS AFTER THE DUE DATE OR WITHIN A LONGER PERIOD AS MAY BE  
11 PROVIDED FOR BY THE CONTRACT.

12 3. THE DATE ON WHICH THE EMPLOYER UNDER WHOSE CONTRACT COVERAGE IS  
13 PROVIDED TO A DEPENDENT CEASES TO PROVIDE COVERAGE TO THE SUBSCRIBER.

14 F. THIS SECTION DOES NOT PERMIT A HOSPITAL SERVICE CORPORATION OR  
15 MEDICAL SERVICE CORPORATION TO REFUSE A WRITTEN ELECTION FOR COVERAGE BY A  
16 DEPENDENT PURSUANT TO SUBSECTION B BASED ON THE DEPENDENT'S PRIOR  
17 DISQUALIFICATION PURSUANT TO SUBSECTION E, PARAGRAPH 1.

18 G. THIS SECTION DOES NOT REQUIRE:

19 1. COVERAGE FOR SERVICES PROVIDED TO A DEPENDENT BEFORE THE EFFECTIVE  
20 DATE OF THIS SECTION.

21 2. THAT AN EMPLOYER PAY ALL OR PART OF THE COST OF COVERAGE FOR A  
22 DEPENDENT AS PROVIDED PURSUANT TO THIS SECTION.

23 H. FOR THE PURPOSES OF THIS SECTION, "DEPENDENT" MEANS A SUBSCRIBER'S  
24 CHILD BY BLOOD OR BY LAW WHO MEETS ALL OF THE FOLLOWING CRITERIA:

25 1. IS LESS THAN THIRTY YEARS OF AGE.

26 2. IS UNMARRIED.

27 3. HAS NO DEPENDENT.

28 4. IS A RESIDENT OF THIS STATE OR IS ENROLLED AS A FULL-TIME STUDENT  
29 AT AN ACCREDITED PUBLIC OR PRIVATE INSTITUTION OF HIGHER EDUCATION.

30 5. IS NOT ACTUALLY PROVIDED COVERAGE AS A NAMED SUBSCRIBER, INSURED,  
31 ENROLLEE OR COVERED PERSON UNDER ANY OTHER GROUP OR INDIVIDUAL HEALTH  
32 BENEFITS PLAN, GROUP HEALTH PLAN OR CHURCH PLAN, OR IS ENTITLED TO BENEFITS  
33 UNDER TITLE XVII OF THE SOCIAL SECURITY ACT.

34 Sec. 2. Title 20, chapter 4, article 9, Arizona Revised Statutes, is  
35 amended by adding section 20-1067, to read:

36 20-1067. Coverage for certain dependents until age thirty by  
37 health care services organization; definition

38 A. ON APPLICATION OF THE DEPENDENT AS PRESCRIBED IN SUBSECTION B, A  
39 HEALTH CARE SERVICES CORPORATION THAT PROVIDES COVERAGE FOR AN ENROLLEE'S  
40 DEPENDENT UNDER WHICH COVERAGE OF THE DEPENDENT TERMINATES AT A SPECIFIC AGE  
41 BEFORE THE DEPENDENT'S THIRTIETH BIRTHDAY SHALL PROVIDE COVERAGE TO THE  
42 DEPENDENT AFTER THAT SPECIFIC AGE UNTIL THE DEPENDENT'S THIRTIETH BIRTHDAY.

43 B. A DEPENDENT WHO IS COVERED BY AN ENROLLEE'S CONTRACT OR EVIDENCE OF  
44 COVERAGE, WHICH COVERAGE UNDER THE CONTRACT OR EVIDENCE OF COVERAGE  
45 TERMINATES AT A SPECIFIC AGE BEFORE THE DEPENDENT'S THIRTIETH BIRTHDAY, MAY

1 MAKE A WRITTEN ELECTION FOR COVERAGE AS A DEPENDENT PURSUANT TO THIS SECTION  
2 UNTIL THE DEPENDENT'S THIRTIETH BIRTHDAY:

3 1. WITHIN THIRTY DAYS BEFORE THE TERMINATION OF COVERAGE AT THE  
4 SPECIFIC AGE PROVIDED IN THE CONTRACT OR EVIDENCE OF COVERAGE.

5 2. WITHIN THIRTY DAYS AFTER MEETING THE REQUIREMENTS FOR DEPENDENT  
6 STATUS AND WHEN COVERAGE FOR THE DEPENDENT UNDER THE CONTRACT OR EVIDENCE OF  
7 COVERAGE PREVIOUSLY TERMINATED.

8 3. DURING AN OPEN ENROLLMENT PERIOD, AS PROVIDED PURSUANT TO THE  
9 CONTRACT OR EVIDENCE OF COVERAGE, IF THE DEPENDENT MEETS THE REQUIREMENT FOR  
10 DEPENDENT STATUS DURING THE OPEN ENROLLMENT PERIOD.

11 C. COVERAGE FOR A DEPENDENT WHO MAKES A WRITTEN ELECTION FOR COVERAGE  
12 PURSUANT TO SUBSECTION B:

13 1. CONSISTS OF COVERAGE THAT IS IDENTICAL TO THE COVERAGE PROVIDED TO  
14 THAT DEPENDENT BEFORE THE TERMINATION OF COVERAGE AT THE SPECIFIC AGE  
15 PROVIDED IN THE CONTRACT OR EVIDENCE OF COVERAGE. IF THE COVERAGE IS  
16 MODIFIED UNDER THE CONTRACT OR EVIDENCE OF COVERAGE FOR ANY SIMILARLY  
17 SITUATED DEPENDENTS FOR COVERAGE BEFORE THE TERMINATION OF COVERAGE AT THE  
18 SPECIFIC AGE PROVIDED IN THE CONTRACT OR EVIDENCE OF COVERAGE, THE COVERAGE  
19 SHALL ALSO BE MODIFIED IN THE SAME MANNER FOR THE DEPENDENT.

20 2. SHALL NOT BE CONDITIONED ON, OR DISCRIMINATE ON THE BASIS OF, LACK  
21 OF EVIDENCE OF INSURABILITY.

22 D. THE ENROLLEE'S CONTRACT OR EVIDENCE OF COVERAGE MAY REQUIRE PAYMENT  
23 OF A PREMIUM BY THE ENROLLEE OR DEPENDENT, AS APPROPRIATE, FOR ANY PERIOD OF  
24 COVERAGE RELATING TO A DEPENDENT'S WRITTEN ELECTION FOR COVERAGE PURSUANT TO  
25 SUBSECTION B. THE PAYMENT SHALL NOT EXCEED ONE HUNDRED TWO PER CENT OF THE  
26 APPLICABLE PORTION OF THE PREMIUM PREVIOUSLY PAID FOR THAT DEPENDENT'S  
27 COVERAGE UNDER THE CONTRACT OR EVIDENCE OF COVERAGE BEFORE THE TERMINATION OF  
28 COVERAGE AT THE SPECIFIC AGE PROVIDED IN THE CONTRACT OR EVIDENCE OF  
29 COVERAGE. THE DIRECTOR, PURSUANT TO RULE, SHALL DETERMINE THE APPLICABLE  
30 PORTION OF THE PREMIUM PREVIOUSLY PAID FOR THE DEPENDENT'S COVERAGE UNDER THE  
31 CONTRACT OR EVIDENCE OF COVERAGE BASED ON THE DIFFERENCE BETWEEN THE  
32 CONTRACT'S OR EVIDENCE OF COVERAGE'S RATING TIER FOR ADULT AND DEPENDENT  
33 COVERAGE OR FAMILY COVERAGE, AS APPROPRIATE, AND SINGLE COVERAGE, OR BASED ON  
34 ANY OTHER FORMULA OR DEPENDENT RATING TIER DEEMED APPROPRIATE BY THE DIRECTOR  
35 THAT PROVIDES A SUBSTANTIALLY SIMILAR RESULT. AT THE ELECTION OF THE PAYOR,  
36 THE PAYOR MAY MAKE PAYMENT OF THE PREMIUM IN MONTHLY INSTALLMENTS.

37 E. COVERAGE FOR A DEPENDENT PROVIDED PURSUANT TO THIS SECTION SHALL BE  
38 PROVIDED UNTIL THE EARLIER OF THE FOLLOWING:

39 1. THE DEPENDENT IS DISQUALIFIED FOR DEPENDENT STATUS.

40 2. THE DATE ON WHICH COVERAGE CEASES UNDER THE CONTRACT OR EVIDENCE OF  
41 COVERAGE BY REASON OF A FAILURE TO MAKE A TIMELY PAYMENT OF ANY PREMIUM  
42 REQUIRED UNDER THE CONTRACT OR EVIDENCE OF COVERAGE BY THE ENROLLEE OR  
43 DEPENDENT FOR COVERAGE PROVIDED PURSUANT TO THIS SECTION. THE PAYMENT OF ANY  
44 PREMIUM SHALL BE CONSIDERED TO BE TIMELY IF MADE WITHIN THIRTY DAYS AFTER THE

1 DUE DATE OR WITHIN A LONGER PERIOD AS MAY BE PROVIDED FOR BY THE CONTRACT OR  
2 EVIDENCE OF COVERAGE.

3 3. THE DATE ON WHICH THE EMPLOYER UNDER WHOSE EVIDENCE OF COVERAGE OR  
4 CONTRACT COVERAGE IS PROVIDED TO A DEPENDENT CEASES TO PROVIDE COVERAGE TO  
5 THE ENROLLEE.

6 F. THIS SECTION DOES NOT PERMIT A HEALTH CARE SERVICES ORGANIZATION TO  
7 REFUSE A WRITTEN ELECTION FOR COVERAGE BY A DEPENDENT PURSUANT TO SUBSECTION  
8 B BASED ON THE DEPENDENT'S PRIOR DISQUALIFICATION PURSUANT TO SUBSECTION E,  
9 PARAGRAPH 1.

10 G. THIS SECTION DOES NOT REQUIRE:

11 1. COVERAGE FOR SERVICES PROVIDED TO A DEPENDENT BEFORE THE EFFECTIVE  
12 DATE OF THIS SECTION.

13 2. THAT AN EMPLOYER PAY ALL OR PART OF THE COST OF COVERAGE FOR A  
14 DEPENDENT AS PROVIDED PURSUANT TO THIS SECTION.

15 H. FOR THE PURPOSES OF THIS SECTION, "DEPENDENT" MEANS AN ENROLLEE'S  
16 CHILD BY BLOOD OR BY LAW WHO MEETS ALL OF THE FOLLOWING CRITERIA:

17 1. IS LESS THAN THIRTY YEARS OF AGE.

18 2. IS UNMARRIED.

19 3. HAS NO DEPENDENT.

20 4. IS A RESIDENT OF THIS STATE OR IS ENROLLED AS A FULL-TIME STUDENT  
21 AT AN ACCREDITED PUBLIC OR PRIVATE INSTITUTION OF HIGHER EDUCATION.

22 5. IS NOT ACTUALLY PROVIDED COVERAGE AS A NAMED SUBSCRIBER, INSURED,  
23 ENROLLEE OR COVERED PERSON UNDER ANY OTHER GROUP OR INDIVIDUAL HEALTH  
24 BENEFITS PLAN, GROUP HEALTH PLAN OR CHURCH PLAN, OR IS ENTITLED TO BENEFITS  
25 UNDER TITLE XVII OF THE SOCIAL SECURITY ACT.

26 Sec. 3. Title 20, chapter 6, article 4, Arizona Revised Statutes, is  
27 amended by adding section 20-1383, to read:

28 20-1383. Coverage for certain dependents until age thirty by  
29 disability insurer; definition

30 A. ON APPLICATION OF THE DEPENDENT AS PRESCRIBED IN SUBSECTION B, A  
31 DISABILITY INSURER THAT PROVIDES COVERAGE FOR AN INSURED'S DEPENDENT UNDER  
32 WHICH COVERAGE OF THE DEPENDENT TERMINATES AT A SPECIFIC AGE BEFORE THE  
33 DEPENDENT'S THIRTIETH BIRTHDAY SHALL PROVIDE COVERAGE TO THE DEPENDENT AFTER  
34 THAT SPECIFIC AGE UNTIL THE DEPENDENT'S THIRTIETH BIRTHDAY.

35 B. A DEPENDENT WHO IS COVERED BY AN INSURED'S POLICY, WHICH COVERAGE  
36 UNDER THE POLICY TERMINATES AT A SPECIFIC AGE BEFORE THE DEPENDENT'S  
37 THIRTIETH BIRTHDAY, MAY MAKE A WRITTEN ELECTION FOR COVERAGE AS A DEPENDENT  
38 PURSUANT TO THIS SECTION UNTIL THE DEPENDENT'S THIRTIETH BIRTHDAY:

39 1. WITHIN THIRTY DAYS BEFORE THE TERMINATION OF COVERAGE AT THE  
40 SPECIFIC AGE PROVIDED IN THE POLICY.

41 2. WITHIN THIRTY DAYS AFTER MEETING THE REQUIREMENTS FOR DEPENDENT  
42 STATUS AND WHEN COVERAGE FOR THE DEPENDENT UNDER THE POLICY PREVIOUSLY  
43 TERMINATED.

1           3. DURING AN OPEN ENROLLMENT PERIOD, AS PROVIDED PURSUANT TO THE  
2 POLICY, IF THE DEPENDENT MEETS THE REQUIREMENT FOR DEPENDENT STATUS DURING  
3 THE OPEN ENROLLMENT PERIOD.

4           C. COVERAGE FOR A DEPENDENT WHO MAKES A WRITTEN ELECTION FOR COVERAGE  
5 PURSUANT TO SUBSECTION B:

6           1. CONSISTS OF COVERAGE THAT IS IDENTICAL TO THE COVERAGE PROVIDED TO  
7 THAT DEPENDENT BEFORE THE TERMINATION OF COVERAGE AT THE SPECIFIC AGE  
8 PROVIDED IN THE POLICY. IF THE COVERAGE IS MODIFIED UNDER THE POLICY FOR ANY  
9 SIMILARLY SITUATED DEPENDENTS FOR COVERAGE BEFORE THE TERMINATION OF COVERAGE  
10 AT THE SPECIFIC AGE PROVIDED IN THE POLICY, THE COVERAGE SHALL ALSO BE  
11 MODIFIED IN THE SAME MANNER FOR THE DEPENDENT.

12           2. SHALL NOT BE CONDITIONED ON, OR DISCRIMINATE ON THE BASIS OF, LACK  
13 OF EVIDENCE OF INSURABILITY.

14           D. THE INSURED'S POLICY MAY REQUIRE PAYMENT OF A PREMIUM BY THE  
15 INSURED OR DEPENDENT, AS APPROPRIATE, FOR ANY PERIOD OF COVERAGE RELATING TO  
16 A DEPENDENT'S WRITTEN ELECTION FOR COVERAGE PURSUANT TO SUBSECTION B. THE  
17 PAYMENT SHALL NOT EXCEED ONE HUNDRED TWO PER CENT OF THE APPLICABLE PORTION  
18 OF THE PREMIUM PREVIOUSLY PAID FOR THAT DEPENDENT'S COVERAGE UNDER THE POLICY  
19 BEFORE THE TERMINATION OF COVERAGE AT THE SPECIFIC AGE PROVIDED IN THE  
20 POLICY. THE DIRECTOR, PURSUANT TO RULE, SHALL DETERMINE THE APPLICABLE  
21 PORTION OF THE PREMIUM PREVIOUSLY PAID FOR THE DEPENDENT'S COVERAGE UNDER THE  
22 POLICY BASED ON THE DIFFERENCE BETWEEN THE POLICY'S RATING TIER FOR ADULT AND  
23 DEPENDENT COVERAGE OR FAMILY COVERAGE, AS APPROPRIATE, AND SINGLE COVERAGE,  
24 OR BASED ON ANY OTHER FORMULA OR DEPENDENT RATING TIER DEEMED APPROPRIATE BY  
25 THE DIRECTOR THAT PROVIDES A SUBSTANTIALLY SIMILAR RESULT. AT THE ELECTION  
26 OF THE PAYOR, THE PAYOR MAY MAKE PAYMENT OF THE PREMIUM IN MONTHLY  
27 INSTALLMENTS.

28           E. COVERAGE FOR A DEPENDENT PROVIDED PURSUANT TO THIS SECTION SHALL BE  
29 PROVIDED UNTIL THE EARLIER OF THE FOLLOWING:

30           1. THE DEPENDENT IS DISQUALIFIED FOR DEPENDENT STATUS.

31           2. THE DATE ON WHICH COVERAGE CEASES UNDER THE POLICY BY REASON OF A  
32 FAILURE TO MAKE A TIMELY PAYMENT OF ANY PREMIUM REQUIRED UNDER THE POLICY BY  
33 THE INSURED OR DEPENDENT FOR COVERAGE PROVIDED PURSUANT TO THIS SECTION. THE  
34 PAYMENT OF ANY PREMIUM SHALL BE CONSIDERED TO BE TIMELY IF MADE WITHIN THIRTY  
35 DAYS AFTER THE DUE DATE OR WITHIN A LONGER PERIOD AS MAY BE PROVIDED FOR BY  
36 THE POLICY.

37           3. THE DATE ON WHICH THE EMPLOYER UNDER WHOSE POLICY COVERAGE IS  
38 PROVIDED TO A DEPENDENT CEASES TO PROVIDE COVERAGE TO THE INSURED.

39           F. THIS SECTION DOES NOT PERMIT A DISABILITY INSURER TO REFUSE A  
40 WRITTEN ELECTION FOR COVERAGE BY A DEPENDENT PURSUANT TO SUBSECTION B BASED  
41 ON THE DEPENDENT'S PRIOR DISQUALIFICATION PURSUANT TO SUBSECTION E,  
42 PARAGRAPH 1.

43           G. THIS SECTION DOES NOT REQUIRE:

44           1. COVERAGE FOR SERVICES PROVIDED TO A DEPENDENT BEFORE THE EFFECTIVE  
45 DATE OF THIS SECTION.

1           2. THAT AN EMPLOYER PAY ALL OR PART OF THE COST OF COVERAGE FOR A  
2 DEPENDENT AS PROVIDED PURSUANT TO THIS SECTION.

3           H. FOR THE PURPOSES OF THIS SECTION, "DEPENDENT" MEANS AN INSURED'S  
4 CHILD BY BLOOD OR BY LAW WHO MEETS ALL OF THE FOLLOWING CRITERIA:

5           1. IS LESS THAN THIRTY YEARS OF AGE.

6           2. IS UNMARRIED.

7           3. HAS NO DEPENDENT.

8           4. IS A RESIDENT OF THIS STATE OR IS ENROLLED AS A FULL-TIME STUDENT  
9 AT AN ACCREDITED PUBLIC OR PRIVATE INSTITUTION OF HIGHER EDUCATION.

10          5. IS NOT ACTUALLY PROVIDED COVERAGE AS A NAMED SUBSCRIBER, INSURED,  
11 ENROLLEE OR COVERED PERSON UNDER ANY OTHER GROUP OR INDIVIDUAL HEALTH  
12 BENEFITS PLAN, GROUP HEALTH PLAN OR CHURCH PLAN, OR IS ENTITLED TO BENEFITS  
13 UNDER TITLE XVII OF THE SOCIAL SECURITY ACT.

14          Sec. 4. Applicability to dependents whose coverage is  
15 terminated

16          A. For twelve months after the effective date of this act, a dependent  
17 who qualifies for dependent status pursuant to this act, but whose coverage  
18 as a dependent under a contract, policy, plan or evidence of coverage is  
19 terminated under the terms of the contract, policy, plan or evidence of  
20 coverage before the effective date of this act, may make a written election  
21 to reinstate coverage under that contract, policy, plan or evidence of  
22 coverage as a dependent pursuant to this act.

23          B. Immediately following the effective date of this act, an insurer  
24 who is subject to this act shall provide notice and information to a  
25 subscriber, enrollee, policyholder or insured about a dependent's opportunity  
26 to make a written election to reinstate coverage as prescribed by  
27 subsection A.