§ 1399.61. Definitions

In this article, unless the context otherwise requires:

- (a) "Carrier" shall mean the health care service plan or other entity responsible for the payment of benefits or provision of services under a group contract.
 - (b) "Dependent" shall have the meaning set forth in a contract.
- (c) "Discontinuance" shall mean the termination of the contract between the entire employer unit under a contract and the health care service plan, and does not refer to the termination of any agreement between any individual member under a contract and the health care service plan.
- (d) "Employee" shall mean all agents, employees, and members of unions or associations to whom benefits are provided under a contract.
- (e) "Extension of benefits" shall mean the continuation of coverage under a particular benefit provided under a contract following discontinuance with respect to an employee or dependent who is totally disabled on the date of discontinuance.
- (f) "Contract" shall mean any group health care service plan or contract subject to the provisions of this article.
 - (g) "Contractholder" shall mean the entity to which a contract is issued.
 - (h) "Dues" shall mean the consideration payable to the carrier.
- (i) "Replacement coverage" shall mean the benefits provided by a succeeding carrier.
 - (j) "Totally disabled" shall have the meaning set forth in a contract.

HISTORY:

Added Stats 1977 ch 64 § 2, effective May 18, 1977. Amended Stats 1983 ch 126 § 1.