

**THE NONPROFIT HEALTH CARE CORPORATION REFORM ACT (EXCERPT)**  
**Act 350 of 1980**

**550.1424 Preexisting condition limitation period; limitation; definition of preexisting condition; health history; coverage of preexisting condition; excluding, limiting, or reducing coverage or benefits.**

Sec. 424. (1) A preexisting condition limitation period in a long-term care certificate, other than a group long-term care certificate described in section 420(b)(i), shall not exceed 1 of the following:

(a) Six months after the effective date of coverage.

(b) A period of time set by the commissioner if the commissioner has found that a longer limitation period than provided for in subdivision (a) is justified because the group is specially limited by age, group categories, or other specific certificate provisions and that the longer limitation period will be in the best interest of the public.

(2) A long-term care certificate, other than a group long-term care certificate described in section 420(b)(i), shall not use a definition of preexisting condition which is more restrictive than the definition in section 420.

(3) The definition of preexisting condition does not prohibit a health care corporation from using an application form designed to elicit the complete health history of an applicant.

(4) Unless otherwise provided in the certificate, a preexisting condition, regardless of whether it is disclosed on the application, need not be covered until after the limitation period. A long-term care certificate shall not exclude or use waivers or riders of any kind to exclude, limit, or reduce coverage or benefits for specifically named or described preexisting conditions beyond the limitation period.

**History:** Add. 1989, Act 110, Eff. Jan. 3, 1990.

**Popular name:** Blue Cross-Blue Shield

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