

PUBLIC HEALTH CODE (EXCERPT)
Act 368 of 1978

333.5659 Life insurer, health insurer, or health care payment or benefits plan; prohibited acts.

Sec. 5659. A life insurer, a health insurer, or a health care payment or benefits plan shall not do 1 or more of the following because a patient with reduced life expectancy due to advanced illness, the patient's patient surrogate, or the patient advocate has made a decision to refuse or discontinue a medical treatment as a result of information received as required under this part:

(a) Refuse to provide or continue coverage or benefits to the patient within the scope and level of coverage or benefits of an existing policy, certificate, or contract.

(b) Limit the amount of coverage or benefits available to the patient within the scope and level of coverage or benefits of an existing policy, certificate, or contract.

(c) Charge the patient a different rate for coverage or benefits under an existing policy, certificate, or contract.

(d) Consider the terms of an existing policy, certificate, or contract to have been breached or modified.

(e) Invoke a suicide or intentional death exemption or exclusion in a policy, certificate, or contract covering the patient.

History: Add. 1996, Act 594, Eff. Mar. 31, 1997;—Am. 2001, Act 237, Eff. Jan. 8, 2002.

Popular name: Act 368