

~~Article 48A — Insurance Code~~

468C.

~~(a) (1) Unless it complies with the requirements of the State Medicare Act, a Medicare supplement policy may not be issued, delivered, or renewed in this State by an insurer.~~

~~(2) This Act shall apply to:~~

~~(i) All certificates issued under group Medicare supplement policies or subscriber contracts, which certificates have been delivered or issued for delivery in the State; and~~

~~(ii) All Medicare supplement policies and subscriber contracts delivered or issued for delivery in the State on or after July 1, 1989.~~

~~(b) (1) In this section "low dose mammography" means x ray examination of the breast using dedicated equipment including x ray tube, filter, compression device, screens, films, and cassettes specifically for mammography with average radiation exposure to deliver less than 1 RAD mid breast, 2 views per breast.~~

~~(2) A Medicare supplement policy shall provide at least the following minimum benefits:~~

~~(i) Coverage of Medicare Part A eligible expenses for the initial Medicare deductible for hospitalization in any Medicare benefit period;~~

~~(ii) Coverage for the daily copayment amount of Medicare Part A eligible expenses for the first 8 days per calendar year incurred for skilled nursing facility care, regardless of any prior hospital confinement;~~

~~(iii) Coverage for the reasonable cost of the first 3 pints of blood under Part A, and effective January 1, 1990 coverage for the reasonable cost of the first 3 pints of blood under Part B, unless replaced in accordance with federal regulations;~~

~~(iv) Coverage for drugs in accordance with paragraph (3)(iii) of this subsection; and~~

~~(v) Coverage in the amount of 20 percent of Medicare eligible expenses under Medicare Part B, which coverage may be limited to a maximum benefit in any calendar year of not less than \$5,000, but in no event in excess of the applicable out of pocket limit under Medicare.~~

~~(3) In addition to the coverage set forth in paragraph (2) of this subsection, a Medicare supplement policy shall:~~

~~(i) Provide coverage of not more than \$100 for an annual screening by low dose mammography for the presence of occult breast cancer;~~

~~(ii) Provide, or offer as an option, coverage of the initial annual deductible for Medicare eligible expenses under Medicare Part B; [and]~~