

SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:

Article – Insurance

15–832.

(a) In this section, “mastectomy” means the surgical removal of all or part of a breast as a result of breast cancer.

(b) This section applies to:

(1) insurers and nonprofit health service plans that provide inpatient hospital, medical, or surgical benefits to individuals or groups on an expense–incurred basis under health insurance policies or contracts that are issued or delivered in the State; and

(2) health maintenance organizations that provide inpatient hospital, medical, or surgical benefits to individuals or groups under contracts that are issued or delivered in the State.

(c) For a patient who receives less than 48 hours of inpatient hospitalization following a mastectomy or the surgical removal of a testicle, or who undergoes a mastectomy or the surgical removal of a testicle on an outpatient basis, an entity subject to this section shall provide coverage for:

(1) one home visit scheduled to occur within 24 hours after discharge from the hospital or outpatient health care facility; and

(2) an additional home visit if prescribed by the patient’s attending physician.

(d) Each entity subject to this section shall provide notice annually to its enrollees and insureds about the coverage required under this section.

**Chapter 120 of the Acts of 1999, as amended by
Chapter 59 of the Acts of 2003**

SECTION 7. AND BE IT FURTHER ENACTED, That, except as provided in Section 6 of this Act, this Act shall take effect October 1, 1999. ~~Section 2 of this Act shall remain effective for a period of [7] 12 years and, at the end of September 30, [2006,] 2011, with no further action required by the General Assembly, Section 2 of this Act shall be abrogated and of no further force and effect.~~

SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect July 1, 2006.

Approved May 2, 2006.