

(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; [and]

(ii) [Coverage of Medicare Part A eligible expenses for hospitalization to the extent not covered by Medicare from the sixty-first day through the ninetieth day in any Medicare benefit period; and

(iii) To the extent not covered by Medicare, coverage of Medicare Part A eligible expenses incurred as daily hospital charges during use of the Medicare lifetime inpatient hospital reserve days; and

(iv) After exhaustion of all Medicare inpatient hospital coverage, including lifetime inpatient hospital reserve days, coverage for a period of 365 days of 90 percent of all Medicare Part A eligible expenses for hospitalization not covered by Medicare; and]

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;