

(b) The provisions of this section apply to all policies issued, renewed, modified, altered, amended, or reissued on or after July 1, 1973.]

[354J.

(a) After January 1, 1977, every nonprofit health service plan which proposes to issue a group hospital policy in Maryland shall offer the prospective group policyholder at an appropriate premium adjustment, if any, the option of providing benefits for the cost of psychiatric care through partial hospitalization.

(b) As used in this section, partial hospitalization means a psychiatric service offered in a hospital or in a psychiatric day care treatment center or in a community mental health facility providing medically directed intensive or intermediate short-term psychiatric treatment for a period of less than 24 hours but more than 4 hours in a day for any individual patient.

(c) Benefits shall provide for psychiatric care for a minimum of 30 partial hospitalization treatment days during any period of 12 consecutive months.

(d) For purposes of this section, any proposed change in benefits provided by an existing group hospital policy shall be considered a proposal to issue a policy under subsection (a).

(e) The provisions of this section shall apply only if an initial enrollment of at least 25 certificate holders under the new or revised group policy can reasonably be expected.]

[470E.

(a) Every individual hospital or major medical insurance policy written on an expense-incurred basis which is delivered or issued for delivery, within this State must include benefits for expenses arising from treatment of acute mental illnesses and emotional disorders which in the professional judgment of practitioners are subject to significant improvement through short-term therapy. These benefits must be at least equal to the following minimum requirements:

(1) With respect to benefits for confinement as an inpatient in a hospital, the period of confinement for which benefits are payable shall be at least 30 days in any calendar year or benefit period;

(2) With respect to major medical expense coverage, benefits, after the applicable deductible, for covered expenses arising from all those services, other than inpatient, which are rendered to treat acute mental illness and emotional disorders, shall be at a rate which is not less than 65 percent for the first 20 visits per calendar year or benefit period and not less than 50 percent for any visits thereafter for that calendar year or benefit period, of the benefits which the policy provides for other types of illness; and

(3) (i) With respect to benefits for residency in a Department of Health and Mental Hygiene approved psychiatric halfway house, the period of residency for which benefits are payable shall be at least 120 days and shall be at a rate which is not less than 75 percent of the per diem rate which amount may not exceed \$30 per day;