

15-506. EFFECT OF MARITAL STATUS ON MATERNITY BENEFITS.

(A) INDIVIDUAL OR FAMILY COVERAGE.

EACH INSURER AND NONPROFIT HEALTH SERVICE PLAN THAT PROVIDES MATERNITY BENEFITS IN A POLICY FORM CUSTOMARILY ISSUED ON AN INDIVIDUAL OR FAMILY BASIS SHALL OFFER THE BENEFITS TO INDIVIDUALS REGARDLESS OF MARITAL STATUS.

(B) GROUP COVERAGE.

(1) THIS SUBSECTION APPLIES TO EACH GROUP OR BLANKET HEALTH INSURANCE POLICY THAT IS DELIVERED OR ISSUED FOR DELIVERY IN THE STATE BY AN INSURER OR NONPROFIT HEALTH SERVICE PLAN.

(2) EACH POLICY SUBJECT TO THIS SUBSECTION THAT PROVIDES MATERNITY BENEFITS FOR PREGNANCY AND CHILDBIRTH OF EMPLOYEES OR MEMBERS OR OF COVERED DEPENDENTS OF EMPLOYEES OR MEMBERS, WHETHER THE BENEFITS ARE IN THE FORM OF DISABILITY, HOSPITAL, MEDICAL, OR SURGICAL BENEFITS, SHALL PROVIDE IDENTICAL BENEFITS REGARDLESS OF MARITAL STATUS TO:

(I) ALL COVERED EMPLOYEES OR MEMBERS; OR

(II) ALL COVERED EMPLOYEES OR MEMBERS AND ALL COVERED DEPENDENTS OF EMPLOYEES OR MEMBERS.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, §§ 354G, 354H, 470-I, and 477J.

In subsection (b)(1) of this section, the reference to a health insurance policy that is delivered or issued for delivery in the State by an "insurer" is added to clarify the applicability of subsection (b) of this section.

In the introductory language of subsection (b)(2) of this section, the former references to benefits for medical or surgical "care" are deleted as surplusage.

Defined terms: "Health insurance" § 1-101

"Insurer" § 1-101

"Policy" § 1-101

15-507. PREEXISTING CONDITIONS.

(A) SCOPE OF SECTION.

(1) THIS SECTION APPLIES TO EACH GROUP OR BLANKET HEALTH INSURANCE CONTRACT OR POLICY THAT IS ISSUED OR DELIVERED IN THE STATE TO AN EMPLOYER BY AN INSURER OR NONPROFIT HEALTH SERVICE PLAN AND THAT PROVIDES HOSPITAL, MEDICAL, OR SURGICAL BENEFITS ON AN EXPENSE-INCURRED BASIS.