

(1) EACH INSURER THAT ISSUES OR DELIVERS INDIVIDUAL HEALTH INSURANCE POLICIES IN THE STATE THAT ARE WRITTEN ON AN EXPENSE-INCURRED BASIS SHALL OFFER BENEFITS FOR HOSPICE CARE SERVICES TO ITS INSURED.

(2) EACH INSURER THAT ISSUES OR DELIVERS GROUP OR BLANKET HEALTH INSURANCE POLICIES OR CONTRACTS IN THE STATE THAT ARE WRITTEN ON AN EXPENSE-INCURRED BASIS SHALL OFFER BENEFITS FOR HOSPICE CARE SERVICES TO ITS POLICYHOLDERS OR BENEFICIARIES.

(B) SAME -- NONPROFIT HEALTH SERVICE PLANS.

EACH NONPROFIT HEALTH SERVICE PLAN SHALL OFFER BENEFITS FOR HOSPICE CARE SERVICES TO ITS SUBSCRIBERS.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, §§ 361E, 470Q, and 477W.

In subsection (a)(1) and (2) of this section, the references to policies and contracts that "are written" on an expense-incurred basis are added for clarity and consistency with similar provisions in this title.

In subsection (a)(1) of this section, the former reference to an insurer that issues or delivers an individual health insurance policy "to any person" in the State is deleted as implicit.

Defined terms: "Health insurance" § 1-101

"Insurer" § 1-101

"Policy" § 1-101

15-810. BENEFITS FOR IN VITRO FERTILIZATION.

(A) SCOPE OF SECTION.

THIS SECTION APPLIES TO:

(1) EACH INDIVIDUAL HOSPITAL OR MAJOR MEDICAL INSURANCE POLICY OF AN INSURER THAT:

(I) 1. IS DELIVERED OR ISSUED FOR DELIVERY IN THE STATE;  
OR

2. COVERS INDIVIDUALS WHO RESIDE AND WORK IN THE STATE; AND

(II) IS WRITTEN ON AN EXPENSE-INCURRED BASIS;

(2) EACH GROUP OR BLANKET HEALTH INSURANCE POLICY OF AN INSURER THAT:

(I) 1. IS ISSUED OR DELIVERED IN THE STATE; OR

2. COVERS INDIVIDUALS WHO RESIDE AND WORK IN THE STATE; AND