OBSTETRICIANS AND GYNECOLOGISTS GUIDELINES FOR IN VITRO FERTILIZATION CLINICS OR TO THE AMERICAN FERTILITY SOCIETY MINIMAL STANDARDS FOR PROGRAMS OF IN VITRO FERTILIZATION.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, §§ 354DD, 470W, and 477EE.

In the introductory language of subsection (a)(1) of this section, the references to each "individual" hospital or major medical insurance policy "of an insurer" are added to clarify the applicability of this section. Similarly, in the introductory language of subsection (a)(2) of this section, the reference to each group or blanket health insurance policy "of an insurer" is added.

In subsection (a)(1)(i)2, (2)(i)2, and (3)(ii) of this section, the references to "individuals" who reside and work in the State are substituted for the former references to "persons" since only an individual can reside and work in the State.

In subsection (a)(3)(ii) of this section, the former phrase "issued outside the State" is deleted as surplusage.

In subsection (c)(4) of this section, the former references to attaining a successful pregnancy through a less costly "applicable" infertility treatment are deleted as implicit.

Defined terms: "Health insurance" § 1-101
"Insurer" § 1-101
"Policy" § 1-101

15-811. HOSPITALIZATION BENEFITS FOR CHILDBIRTH.

(A) REOUIRED.

EACH INSURER AND NONPROFIT HEALTH SERVICE PLAN THAT ISSUES OR DELIVERS AN INDIVIDUAL, GROUP, OR BLANKET HEALTH INSURANCE POLICY IN THE STATE THAT PROVIDES HOSPITALIZATION BENEFITS FOR NORMAL PREGNANCY SHALL PROVIDE HOSPITALIZATION BENEFITS FOR CHILDBIRTH TO THE SAME EXTENT AS THE HOSPITALIZATION BENEFITS PROVIDED IN THE POLICY FOR ANY COVERED ILLNESS.

(B) ADDITIONAL HOSPITALIZATION FOR NEWBORN.

(1) IN ADDITION TO THE PROVISIONS OF SUBSECTION (A) OF THIS SECTION AND § 15–812 OF THIS SUBTITLE, WHENEVER A MOTHER IS REQUIRED TO REMAIN HOSPITALIZED AFTER CHILDBIRTH FOR MEDICAL REASONS AND THE MOTHER REQUESTS THAT THE NEWBORN REMAIN IN THE HOSPITAL, THE INSURER OR NONPROFIT HEALTH SERVICE PLAN SHALL PAY THE COST OF ADDITIONAL HOSPITALIZATION FOR THE NEWBORN FOR UP TO 4 DAYS.