

EACH INSURER THAT PROPOSES TO ISSUE A POLICY SUBJECT TO THIS SECTION THAT PROVIDES BENEFITS FOR TEMPORARY DISABILITY SHALL OFFER THE POLICYHOLDER THE OPTION OF PROVIDING BENEFITS FOR TEMPORARY DISABILITY CAUSED OR CONTRIBUTED TO BY PREGNANCY OR CHILDBIRTH.

(C) EXTENT OF BENEFITS.

THE BENEFITS UNDER THIS SECTION SHALL BE PROVIDED TO THE SAME EXTENT AND ON THE SAME TERMS AS THE BENEFITS PROVIDED FOR ANY OTHER COVERED DISABILITY.

REVISOR'S NOTE: This section is new language derived without substantive change from former Art. 48A, § 477P.

In subsection (a)(3) of this section, the reference to "individuals" who reside or work in the State is substituted for the former reference to "persons" since only an individual can reside or work in the State.

In subsection (b) of this section, the former reference to the "prospective group" policyholder is deleted as surplusage.

In subsection (c) of this section, the reference to benefits "provided for" any other covered disability is substituted for the former reference to benefits "applied to" any other covered disability for clarity.

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

15-814. COVERAGE FOR MAMMOGRAMS.

(A) "MAMMOGRAM" DEFINED.

IN THIS SECTION, "MAMMOGRAM" MEANS AN X-RAY EXAMINATION OF THE BREAST USING DEDICATED EQUIPMENT, INCLUDING AN X-RAY TUBE, FILTER, COMPRESSION DEVICE, SCREENS, FILMS, AND CASSETTES, SPECIFICALLY FOR MAMMOGRAPHY THAT DELIVERS AN AVERAGE RADIATION EXPOSURE OF LESS THAN ONE RAD MID-BREAST WITH TWO VIEWS FOR EACH BREAST.

(B) SCOPE OF SECTION.

THIS SECTION APPLIES TO EACH INDIVIDUAL HOSPITAL OR MAJOR MEDICAL INSURANCE POLICY, GROUP OR BLANKET HEALTH INSURANCE POLICY, AND NONPROFIT HEALTH SERVICE PLAN THAT IS DELIVERED OR ISSUED FOR DELIVERY IN THE STATE AND IS WRITTEN ON AN EXPENSE-INCURRED BASIS.

(C) COVERAGE REQUIRED.

A POLICY OR PLAN SUBJECT TO THIS SECTION SHALL PROVIDE COVERAGE FOR:

- (1) A BASELINE MAMMOGRAM FOR WOMEN WHO ARE 35 TO 39 YEARS OLD;