

(vi) Coverage under Medicare Part A for the reasonable cost of the first 3 pints of blood, or equivalent quantities of packed red blood cells, as defined under federal regulations, in any calendar year unless replaced in accordance with federal regulations or already paid for under Medicare Part B; and

(vii) Coverage under Medicare Part B for the reasonable cost of the first 3 pints of blood, or equivalent quantities of packed red blood cells, as defined under federal regulations, in any calendar year unless replaced in accordance with federal regulations or already paid for under Part A, subject to the Medicare Part B deductible amount.

(3) In addition to the coverage set forth in paragraph (2) of this subsection, a Medicare supplement policy shall:

(i) Provide coverage of not more than \$100 for an annual screening by low-dose mammography for the presence of occult breast cancer; and

(ii) Provide, or offer as an option, coverage of the initial annual deductible for Medicare eligible expenses under Medicare Part B.

(c) A Medicare supplement policy shall provide that benefits designed to cover deductibles or coinsurance amounts under Medicare will be changed automatically to coincide with any changes in the applicable Medicare deductible and copayment provisions. Subject to approval by the Insurance Commissioner, the insurer may reserve the right to change premiums to correspond with these changes in benefits.

(d) (1) Payment of a benefit for a Medicare eligible expense under a Medicare supplement policy may be conditioned on the same or less restrictive payment conditions, including determination of medical necessity, as are applicable to a Medicare claim.

(2) Coverage under a Medicare supplement policy may not be subject to any exclusions, limitations, or reductions not consistent with the exclusions, limitations, or reductions under Medicare, except:

(i) The policy shall provide that, to the extent a benefit is available to the insured person under Medicare, coverage is not duplicated for the benefit; and

(ii) As otherwise expressly permitted under this article or under the rules and regulations adopted by the Commissioner under this article.

(e) (1) A Medicare supplement insurance policy, contract, or certificate in force in the State may not provide benefits which duplicate benefits provided by Medicare.

(2) If amendments to Title XVIII of the Social Security Act effective on and after June 1, 1990 provide benefits under Medicare which duplicate any of the minimum benefits of this section, the minimum benefits of this section shall be reduced to the extent of the duplication.