

(III) ALL VISITS FOR AND COSTS OF AGE-APPROPRIATE SCREENING TESTS FOR TUBERCULOSIS, ANEMIA, LEAD TOXICITY, HEARING, AND VISION AS DETERMINED BY THE AMERICAN ACADEMY OF PEDIATRICS;

(IV) THE FOLLOWING SERVICES AT EACH OF THE VISITS REQUIRED UNDER SUBPARAGRAPHS (I), (II), AND (III) OF THIS PARAGRAPH:

1. A PHYSICAL EXAMINATION;
2. A DEVELOPMENTAL ASSESSMENT; AND
3. PARENTAL ANTICIPATORY GUIDANCE; AND

(V) LABORATORY TESTS CONSIDERED NECESSARY BY THE PHYSICIAN AS INDICATED BY THE SERVICES PROVIDED UNDER SUBPARAGRAPHS (I), (II), (III), OR (IV) OF THIS PARAGRAPH.

~~(D) (1) A NONPROFIT HEALTH SERVICE PLAN MAY NOT IMPOSE A COPAYMENT, DEDUCTIBLE, COINSURANCE, OR DOLLAR LIMITATION ON THE COVERAGE REQUIRED UNDER THIS SECTION.~~

~~(2) NOTICE OF THE PROHIBITION ESTABLISHED UNDER PARAGRAPH (1) OF THIS SUBSECTION SHALL BE STATED IN A HEALTH INSURANCE POLICY IN A FORM APPROVED BY THE COMMISSIONER.~~

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(A) IN THIS SECTION, "CHILD WELLNESS SERVICES" MEANS A PREVENTIVE ACTIVITY DESIGNED TO:

- (1) PROTECT CHILDREN FROM MORBIDITY AND MORTALITY; AND
- (2) PROMOTE CHILD DEVELOPMENT.

(B) THE PROVISIONS OF THIS SECTION APPLY TO A HOSPITAL OR MAJOR MEDICAL INSURANCE POLICY THAT:

- (1) IS WRITTEN ON AN EXPENSE INCURRED BASIS;
- (2) PROVIDES COVERAGE FOR A FAMILY MEMBER OF THE INSURED; AND
- (3) ~~(4)~~ IS DELIVERED OR ISSUED FOR DELIVERY IN THE STATE; OR

~~(H) COVERS PERSONS WHO RESIDE WITHIN THE STATE.~~

(C) (1) A HOSPITAL OR MAJOR MEDICAL INSURANCE POLICY SHALL INCLUDE UNDER THE FAMILY MEMBER COVERAGE A MINIMUM PACKAGE OF CHILD WELLNESS SERVICES THAT ARE CONSISTENT WITH: