

MAINE STATE LEGISLATURE

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ONE HUNDRED AND SEVENTH LEGISLATURE

Legislative Document

No. 1637

H. P. 1324

House of Representatives, April 2, 1975

On Motion of Mr. Clark of Freeport referred to Committee on Business Legislation. Sent up for concurrence and ordered printed.

EDWIN H. PERT, Clerk

Presented by Mr. Farnham of Hampden.

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED
SEVENTY-FIVE

AN ACT to Require Health Care Coverage for Newly Born Children.

Be it enacted by the People of the State of Maine, as follows:

Sec. 1. 24 MRSA § 2318 is enacted to read:

§ 2318. Coverage for newly born children

All nonprofit hospital service plans, all nonprofit medical service plans and all nonprofit health care plans which provide coverage for dependent children of a subscriber shall, as to such dependent children's coverage, also provide that the benefits applicable for children shall be payable, to the limits of coverage, with respect to a newly born child of the subscriber from and after the moment of birth. The coverage for newly born children shall consist of coverage of injury or sickness including the necessary care and treatment of medically diagnosed congenital defects and birth abnormalities. If payment of a specific subscription fee is required to provide coverage for a child, the contract may require that notification of birth of a newly born child and payment of the required fees must be furnished to the corporation which operates such plan within 31 days after the date of birth in order to have the coverage continue beyond such 31-day period.

Sec. 2. 24-A MRSA § 2741 is enacted to read:

§ 2741. Coverage for newly born children

All health insurance policies which provide coverage for dependent children of an insured shall, as to such dependent children's coverage, also provide that the health insurance benefits applicable for children shall be payable, to the limits of coverage, with respect to a newly born child of the insured

from and after the moment of birth. The coverage for newly born children shall consist of coverage of injury or sickness including the necessary care and treatment of medically diagnosed congenital defects and birth abnormalities. If payment of a specific premium is required to provide coverage for a child, the policy may require that notification of birth of a newly born child and payment of the required premium must be furnished to the insurer within 31 days after the date of birth in order to have the coverage continue beyond such 31-day period.

Sec. 3. 24-A MRSA § 2832 is enacted to read:

§ 2832. Group coverage for newly born children

All group health insurance policies which provide coverage for dependent children of persons in the insured group shall, as to such dependent children's coverage, also provide that benefits applicable for children shall be payable, to the limits of coverage with respect to a newly born child of a person in the insured group from and after the moment of birth. The coverage for newly born children shall consist of coverage of injury or sickness including the necessary care and treatment of medically diagnosed congenital defects and birth abnormalities. If payment of a specific premium is required to provide coverage for a child, the policy may require that notification of birth of a newly born child and payment of the required premium must be furnished to the insurer within 31-days after the date of birth in order to have the coverage continue beyond such 31-day period.

Sec. 4. **Applicability.** The requirements of this Act shall apply to all such policies and contracts delivered or issued for delivery in this State more than 120 days after the effective date of this Act.

STATEMENT OF FACT

The purpose of this bill is to require all health care policies and contracts that cover dependent children to cover injury or sickness to children from the moment of birth. Many such policies and contracts do not provide such coverage until 2 weeks or more after birth and do exclude injuries or illnesses incurred during that period which continue afterwards. The bill would not require such coverage for routine well-baby care services, since that would be very expensive, but does require coverage of injury or illness, including congenital defects and birth abnormalities.

Similar legislation has been adopted in over 20 states.