

General Assembly

Raised Bill No. 377

February Session, 2022

LCO No. 2823



Referred to Committee on INSURANCE AND REAL ESTATE

Introduced by: (INS)

AN ACT CONCERNING HEALTH INSURANCE COVERAGE FOR NEWBORNS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- Section 1. Section 38a-490 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2023*):
- (a) Each individual health insurance policy delivered, issued for delivery, renewed, amended or continued in this state providing coverage of the type specified in subdivisions (1), (2), (4), (6), (10), (11) and (12) of section 38a-469 for a family member of the insured or subscriber shall, as to such family member's coverage, also provide that the health insurance benefits applicable for children shall be payable with respect to a newly born child of the insured or subscriber from the moment of birth.
- 11 (b) Coverage for such newly born child shall consist of coverage for 12 injury and sickness including necessary care and treatment of medically 13 diagnosed congenital defects and birth abnormalities within the limits 14 of the policy.

- (c) If payment of a specific premium or subscription fee is required to provide coverage for a child, the policy or contract may require that notification of birth of such newly born child and payment of the required premium or fees shall be furnished to the insurer, hospital service corporation, medical service corporation or health care center not later than [sixty-one] one hundred twenty-one days after the date of birth or the date of discharge from the hospital, whichever is later, in order to continue coverage beyond such [sixty-one-day] period, provided failure to furnish such notice or pay such premium or fees shall not prejudice any claim originating within such [sixty-one-day] period.
- Sec. 2. Section 38a-516 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective January 1, 2023*):
 - (a) Each group health insurance policy delivered, issued for delivery, renewed, amended or continued in this state providing coverage of the type specified in subdivisions (1), (2), (4), (6), (11) and (12) of section 38a-469 for a family member of the insured or subscriber shall, as to such family member's coverage, also provide that the health insurance benefits applicable for children shall be payable with respect to a newly born child of the insured or subscriber from the moment of birth.
 - (b) Coverage for such newly born child shall consist of coverage for injury and sickness including necessary care and treatment of medically diagnosed congenital defects and birth abnormalities within the limits of the policy.
 - (c) If payment of a specific premium fee is required to provide coverage for a child, the policy may require that notification of birth of such newly born child and payment of the required premium or fees shall be furnished to the insurer, hospital service corporation, medical service corporation or health care center not later than [sixty-one] one hundred twenty-one days after the date of birth or the date of discharge from the hospital, whichever is later, in order to continue coverage beyond such [sixty-one-day] period, provided failure to furnish such

- 47 notice or pay such premium shall not prejudice any claim originating
- 48 within such [sixty-one-day] period.

This act shall take effect as follows and shall amend the following
sections:

Section 1	January 1, 2023	38a-490
Sec. 2	January 1, 2023	38a-516

INS Joint Favorable