

SENATE FILE 1290

By COMMITTEE ON HUMAN RESOURCES

FILED MAR 12 1974

Passed Senate, Date 4-5-74 (1221) Passed House, Date 4-16-74 (1764)  
Vote: Ayes 47 Nays 0 Vote: Ayes 90 Nays 0  
Approved 4-25-74

## A BILL FOR

1 An Act relating to individual and group health insurance  
2 policies and subscriber contracts for newly born children.  
3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:  
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S—2564

1 Amend Senate File 1290, page 2, by striking lines 1  
2 through 11 and inserting in lieu thereof the following:  
3 Section 1. NEW SECTION.  
4 1. Any policy of individual or group accident  
5 and sickness insurance providing coverage on an ex-  
6 pense incurred basis, and any individual or group  
7 hospital or medical service contracts issued pursuant  
8 to chapters five hundred nine (509), five hundred  
9 fourteen (514), and five hundred fourteen A (514A) of  
10 the Code, which provides coverage for a family member  
11 of the insured or subscriber shall also provide that  
12 the health insurance benefits applicable for children  
13 shall be payable with respect to a newly born child  
14 of the insured or subscriber from the moment of birth.

S—2564 Filed-*Adopted 4/5*  
March 22, 1974

By DODERER and SCHWIEGER

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1 Section 1. NEW SECTION.

2 1. Any policy of group or individual accident and sickness  
3 insurance issued pursuant to chapters five hundred nine (509)  
4 or five hundred fourteen A (514A), of the Code, or individual  
5 or group hospital or medical subscriber contract issued pur-  
6 suant to chapter five hundred fourteen (514) of the Code, which  
7 provides coverage for a family member of the insured or sub-  
8 scriber shall also provide that the health insurance benefits  
9 applicable for children shall be payable with respect to a  
10 newly born child of the insured or subscriber from the moment  
11 of birth.

12 2. The coverage for newly born children shall consist of  
13 coverage for injury or sickness including the necessary care and  
14 treatment of medically diagnosed congenital defects and birth  
15 abnormalities.

16 3. If payment of a specific premium or subscription fee  
17 is required to provide coverage for a newly born child, the  
18 policy or contract may require that notification of birth  
19 of a newly born child and payment of the required premium  
20 or fees must be furnished to the insurer or nonprofit service  
21 or indemnity corporation within thirty-one days after the date  
22 of birth in order to have coverage continue beyond such  
23 thirty-one day period.

24 Sec. 2. The provisions of this Act shall become effective  
25 January 1, 1975.

26 EXPLANATION

27 This Act provides health insurance benefits for newly born  
28 children from the moment of birth.

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