

HOUSE BILL NO. 297

IN THE LEGISLATURE OF THE STATE OF ALASKA

SEVENTEENTH LEGISLATURE - FIRST SESSION

BY THE HOUSE LABOR AND COMMERCE COMMITTEE

Introduced: 4/22/91

Referred: Health, Education & Social Services, Labor & Commerce, Finance

A BILL

FOR AN ACT ENTITLED

1 "An Act relating to insurance coverage for adopted children and children placed for  
2 adoption."

3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

4 \* Section 1. AS 21.42.345 is amended to read:

5           Sec. 21.42.345. REQUIRED PROVISION FOR COVERAGE FOR NEWLY BORN OR  
6           ADOPTED CHILDREN. All individual and group health insurance policies providing coverage  
7           on an expense incurred basis and individual and group service or indemnity type contracts issued  
8           by a nonprofit corporation that provide coverage for a family member of the insured or subscriber  
9           shall, as to the family members' coverage, also provide that the health insurance benefits  
10          applicable for children shall be payable with respect to a newly born child of the insured or  
11          subscriber from the moment of birth, a child adopted by the insured or subscriber, and a child  
12          placed with the insured or subscriber for adoption. The coverage for adopted children or  
13          children placed for adoption must include coverage for preexisting conditions. The coverage  
14          for newly born children shall consist of coverage of injury or sickness including the necessary

1 care and treatment of medically diagnosed congenital defects and birth abnormalities. If payment  
2 of a specific premium or subscription fee is required to provide coverage for a child, the policy  
3 or contract may require that notification of birth of a newly born child, adopted child, or child  
4 placed for adoption and payment of the required premium or fees must be furnished to the  
5 insurer or nonprofit service or indemnity corporation within 31 days after the date of birth,  
6 adoption, or placement in order to have the coverage continue beyond the 31-day period. [THE  
7 REQUIREMENTS OF THIS CHAPTER SHALL APPLY TO ALL INSURANCE POLICIES  
8 AND SUBSCRIBER CONTRACTS DELIVERED OR ISSUED FOR DELIVERY IN THIS  
9 STATE AFTER DECEMBER 26, 1975.]

10 \* Sec. 2. APPLICABILITY. This Act applies to all individual and group health insurance policies  
11 providing coverage on an expense incurred basis, and to individual and group service or indemnity  
12 contracts issued by a nonprofit corporation that provide coverage for a family member of the insured or  
13 subscriber, that are entered into or renewed on or after the effective date of this Act.