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**IDAPA 18  
TITLE 01  
CHAPTER 07**

**18.01.07 – MATERNITY BENEFITS UNDER HOSPITAL, SURGICAL,  
AND MEDICAL CONTRACTS IN IDAHO**

**000. (RESERVED)**

**001. TITLE AND SCOPE.**

The purpose of this rule is to arrive at a uniform interpretation of Idaho Insurance Laws concerning claims for maternity benefits under group hospital, surgical and medical contracts, by defining the basis for determining the liability of the carriers when a group policyholder changes from one carrier to another. While the Insurance Department realizes it cannot modify existing liability or impose additional liability at the time of change, it is of the opinion that the Legislature of Idaho did not intend that any person, pregnant at the time of change of carriers, should either suffer a loss in maternity coverage or receive duplicate maternity coverage due solely to a change of carriers.

(7-1-93)

**002. -- 003. (RESERVED)**

**004. DEFINITIONS.**

For purposes of this rule:

(7-1-93)

**01. Carrier.** The term “carrier” refers to insurance companies, hospital service corporations such as Blue Cross and medical service corporations such as Blue Shield. (7-1-93)

**02. Group Contract.** The term “group contract” refers to: (7-1-93)

**a.** Group insurance policies hereafter issued or issued for delivery in the state of Idaho by insurance companies under the authority of Chapter 22, Title 41, Idaho Code. (7-1-93)

**b.** Group subscriber contracts hereafter issued or issued for delivery in the state of Idaho by hospital service corporations under the authority of Chapter 34, Title 41, Idaho Code. (7-1-93)

**c.** Group subscriber contracts hereafter issued or issued for delivery in the state of Idaho by medical service corporations under the authority of Chapter 34, Title 41, Idaho Code, and (7-1-93)

**d.** All policies and subscriber contracts covering five or more of a class of employees or members of a group, with or without a master contract, hereafter issued or issued for delivery in the state of Idaho, provided either or both of the following conditions were in existence when pregnancy commenced: (7-1-93)

**i.** Premiums were paid to the carrier by the employer or other remitting agent rather than directly by the individuals insured. (7-1-93)

**ii.** Premiums were at a rate lower than under corresponding separately-issued individual and family expense policies or under corresponding subscriber contracts operating on a direct-pay basis. (7-1-93)

**03. Group Policyholder.** The term “group policyholder” refers to the employer, union or other organization to which the group contract is issued by a carrier. (7-1-93)

**04. Maternity Benefits.** The term “maternity benefits” refers to hospital, medical and surgical benefits provided by the contract for the care of the mother during pregnancy and for her childbirth, abortion or miscarriage, exclusive of any benefits of the type normally referred to as major or catastrophic medical benefits. (7-1-93)

**005. -- 010. (RESERVED)**

**011. APPLICATION.**

**01. Responsibility of Succeeding Carrier.** In all cases where a group changes from one carrier to another, it shall be the responsibility of the succeeding carrier to disclose to the policyholder how the change in carriers will affect continuity of maternity coverage and, in cases where maternity coverage is to be provided under the new plan, to recommend a plan which will protect persons, pregnant at the time of a change in carriers, against loss of maternity benefits to which they would be entitled except for the change. (7-1-93)

**02. Coverage Description of Policyholder.** It is a matter of importance to the Insurance Department, therefore, that where there is a change in carriers, the coverage offered be clearly described for the benefit of the policyholder so that full consideration can be given to the rights of the persons insured. All carriers are requested to cooperate in this respect and to inform their agents and brokers of the added responsibility they bear in presenting insurance programs or prepayment plans to policyholders who have an existing insurance program or prepayment plan with another carrier. (7-1-93)

**012. -- 999. (RESERVED)**

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